

**Corporate Policy** 

# LEGIONELLA MANAGEMENT POLICY

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# 1.0 Policy

#### 1.1 Introduction:

Northwest Leicestershire District Council (the Council) accepts it has a responsibility to protect employees, members of the public and others who may be affected by its business operation against the risk of *Legionella* infection (legionellosis), arising from plant, equipment, facilities, work- or work-related activities and will implement the framework given in this document to ensure this responsibility is met.

#### 1.2 Purpose and Scope.

This Policy and sets out the strategy the Council will follow and includes the framework of the procedures for achieving and maintaining it. This framework defines the stages and specifies the management, operational and specialist responsibilities, and lays down a clear management and communication structure to ensure that it is effective and that it fails safe, wherever practicable

# 2.0 Organisation

#### 2.1 Lines of Responsibility

2.1.1 The Council's duty to maintain and implement the Legionella Policy falls under the remit of the Asset Management, Property Services, and any other team with designated responsibilities. The responsible manager for each team will implement the control framework as detailed in this document reporting to the duty holder.

#### 2.2 Responsibilities

#### 2.2.1 Chief Executive

As the duty holder The Chief Executive has responsibility to support this policy by ensuring the allocation of resources including an adequate budget, suitable and sufficient equipment, personnel, time, and training.

In particular they will:

- Ensuring a legionella risk assessment is undertaken by a competent person to identify and assess risk of exposure to legionella from work activities and water systems and precautionary measures.
- Appoint appropriate 'Responsible Persons' to oversee, control and coordinate the control of the risk of legionellosis.
- Ensure that there are adequate resources available to control the risk of legionellosis.

#### 2.2.2 Strategic Directors

As the Responsible Persons the Strategic Directors are responsible for putting into effect such measures as are required to control the risk of legionellosis, both as a matter of routine and in the event of a crisis. The Responsible Person has a duty to ensure that Approved Code of Practice (ACOP) L8 and all relevant legislation associated with the management and control of legionellosis are adhered to. The Responsible Person also has a responsibility to ensure records are kept confirming that this policy has been implemented.

The Responsible Persons have the overriding authority for the control of *Legionella* to ensure that

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all the Council sites meet the requirements of Legislation and this policy. The 'Responsible Person' is required to ensure that nominated Council staff are trained and competent to undertake the prescribed task on their behalf and to ensure that the 'Responsible Person' tasks and requirements are duly met.

#### 2.2.3 Asset Management and Property Services

As the Responsible Managers the Property Service and Asset Managers have been given their authority by the 'Responsible Persons' to act on their behalf to oversee the day-to-day management of *Legionella* control for the Council. They have responsibility for overseeing and co-ordinating the *Legionella* Policy and Procedures.

This position carries with it the authority to put into effect such measures as are required to control the risk of legionellosis, both as a matter of routine and in the event of a crisis. The 'Responsible Managers' also have a responsibility to ensure records are kept confirming that this policy has been implemented.

They have the responsibility for the day-to-day management including ensuring that the scheme of precautions to control the risk of legionellosis is implemented fully by competent persons, whether directly employed by the Council, contracted, or subcontracted.

In particular they will:

- Oversee the control and management of legionellosis.
- Ensure that legionellosis risk assessments are undertaken.
- Eliminate risk where reasonably practicable.
- Control risk where elimination is not reasonably practicable, by devising and implementing a scheme of precautions.
- Arrange maintenance, monitoring and management of the precautions controlling the

risk, including reviewing the risk assessment if there has been any material change and

at intervals not exceeding two years.

- Arrange the procurement of competent help, as required, including ensuring that the organisations and individuals deployed are competent and appropriately trained and experienced.
- Keep records.

# 3.0 Assessment of the Risk of Legionellosis

3.1 The Responsible Managers will commission a risk assessment in line with the Health and Safety Commission's Approved Code of Practice (ACoP L8):

Legionnaires' disease – The Control of Legionella Bacteria in Water Systems with an appropriately competent contractor to assess the risk of legionellosis, on all plant, equipment, facilities, and as appropriate, work, and work-related activities.

3.3 Following completion of the Risk assessment all remedial actions shall be reported to the Responsible Manager. Actions shall be categorised into high, medium, and low priority based on the level of risk presented. The responsible

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person shall ensure that all recommendations are implemented and record on completion.

3.4 Should the risk assessment identify significant risk of legionellosis which cannot be controlled, the plant, equipment, building, or work-related activity shall be suspended until safe methods of operation have been devised and implemented.

# 4.0 Written Scheme

4.1 Where the risk assessment indicates a reasonably foreseeable risk and it is reasonably practicable to prevent or control the risk, a written scheme of control shall be written. The written scheme of control should include:

- The Risk assessment
- The monitoring regime
- Schematic drawing of water system
- Treatment programmes (where applicable)
- System control parameters; physical, chemical, and biological; sample locations; frequency of sampling.
- Emergency plan if written scheme not effective.

# 5.0 Risk Control

To control the risk to health from legionella bacteria the following risk control measures will be considered for each Council property:

- Avoidance of water temperatures between 20°C 45°C
- Avoidance of stagnation within the system.
- Maintenance of cleanliness of the system.
- Control the release of water spray.
- Chemical treatment.

# 6.0 Monitoring

6.1 To ensure controls in place are effective in controlling legionella, routine monitoring shall be undertaken. It is the responsibility of the Premises and Assets Managers to ensure that suitable monitoring is implemented and recorded correctly, at the required frequency, as detailed in written scheme.

6.2 A suitably competent person will be appointed to undertake the Legionella monitoring regime and to undertake any required remedial measures. To ensure accurate monitoring all equipment used should be calibrated before use.

6.3 Guidance on monitoring requirements and frequencies for different systems are provided in Appendix A.

6.4 Where Microbiological monitoring is undertaken this will be as determined by the risk assessment and should take account of high-risk situations such as health care premises. Appendix B provides guidance on actions to take if legionella is found in the water.

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# 7.0 Legionella Outbreak

7.1 If a person is confirmed as contracting Legionnaires disease this will be notifiable by the Doctor under the Health Protection (Notification) regulations 2010. If the source of the outbreak is suspected to be related to the Council systems we will be contacted, and an investigation will be conducted by the HSE and the Health security agency.

7.2 The council will be required to report cases of Legionella under the Reporting of Injuries and Dangerous Occurrence Regulations (RIDDOR) if:

- A medical practitioner notifies the Council about an employee with Legionellosis. AND
- That employee's current job involves work on water service systems located in the workplace.

7.3 In the event of an outbreak the Council will take immediate actions to mitigate the risk from legionella.

These will include:

- Shutting down processes capable of generating and disseminating airborne water droplets until sampling and cleaning procedures have been completed.
- Take water samples before emergency disinfection is undertaken.
- Provide full co-operation to the local enforcement agency who may undertake an investigation.

# 8.0 Training

8.1 The council will ensure that those employees or subcontractors involved in the management of legionella have suitable training, knowledge and the skills required to meet their responsibilities for legionella control. Appendix C provides details of the levels of training required.

# 9.0 Records

9.1 In line with the requirements of ACOP L8, all risk assessments, precautionary measures, monitoring records and treatment plans shall be documented and available on the system.

9.2 All records will be retained throughout the period they are current and for at least two years afterwards. Records of any monitoring inspection, test or checks carried out and the dates for at least five years.

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# 10. Legislation and Guidance

10.1 It is the policy of the Council to comply fully with the HSE guidance:

'Legionnaires Disease: The control of legionella bacteria in water systems' Approved code of practice and Guidance (L8)

10.2 The Council will also comply with the requirements of the following applicable legislation:

- Health and Safety at Work Act 1974
- Control of Substances Hazardous to Health Regulations 2002
- Management of Health and Safety at Work Regulations 1999
- Reporting Injuries, Disease and Dangerous Occurrences Regulations 2013
- Notification of Cooling Towers and Evaporative Condensers Regulations 1992
- Safety Representative and Safety Committee Regulations 1977
- The Health and Safety (Consultation with Employees) Regulations 1996

10.3 The following HSE guidance documents will also be used where appropriate:

- HSG274 Legionnaires' disease: Technical guidance Part 1: The control of legionella bacteria in evaporating cooling systems (2013).
- HSG274 Legionnaires' disease: Technical guidance Part 2: The control of legionella bacteria in hot and cold-water systems (2014).
- HSG274 Legionnaires' disease: Technical guidance Part 3: The control of legionella bacteria in other risk systems (2013).

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# Appendix A - Guidance - Monitoring for Hot and Cold water Systems

Service	Action to take	Frequency
Calorifiers	Inspect calorifier internally by removing the inspection hatch or using a boroscope and clean by draining the vessel. The frequency of inspection and cleaning should be subject to the findings and increased or decreased based on conditions recorded	Annually, or as indicated by the rate of fouling
	Where there is no inspection hatch, purge any debris in the base of the calorifier to a suitable drain Collect the initial flush from the base of hot water heaters to inspect clarity, quantity of debris, and temperature	Annually, but may be increased as indicated by the risk assessment or result of inspection findings
	Check calorifier flow temperatures (thermostat settings should modulate as close to 60 °C as practicable without going below 60 °C) Check calorifier return temperatures (not below 50 °C).	Monthly
Hot water services	For non-circulating systems: take temperatures at sentinel points (nearest outlet, furthest outlet, and long branches to outlets) to confirm they are at a minimum of 50 °C within one minute (55 °C in healthcare premises)	Monthly
	For circulating systems: take temperatures at return legs of principal loops (sentinel points) to confirm they are at a minimum of 50 °C (55 °C in healthcare premises). Temperature measurements may be taken on the surface of metallic pipework	Monthly
	For circulating systems: take temperatures at return legs of subordinate loops, temperature measurements can be taken on the surface of pipes, but where this is not practicable, the temperature of water from the last outlet on each loop may be measured and this should be greater than 50 °C within one minute of running (55 °C in healthcare premises). If the temperature rise is slow, it should be confirmed that the outlet is on a long leg and not that the flow and return has failed in that local area	Quarterly (ideally on a rolling monthly rota)
	All HWS systems: take temperatures at a representative selection of other points (intermediate outlets of single pipe systems and tertiary loops in circulating systems) to confirm they are at a minimum of 50 °C (55 °C in healthcare premises) to create a temperature profile of the entire system over a defined time period	Representative selection of other sentinel outlets considered on a rotational basis to ensure the entire system is reaching satisfactory temperatures for legionella control
POU water heaters (no greater than 15 litres)	Check water temperatures to confirm the heater operates at 50–60 °C (55 °C in healthcare premises) or check the installation has a high turnover	Monthly–six monthly, or as indicated by the risk assessment
Combination water heaters	Inspect the integral cold water header tanks as part of the cold water storage tank inspection regime, clean and disinfect, as necessary. If evidence shows that the unit regularly overflows hot water into the integral cold water header tank, instigate a temperature monitoring regime to determine the frequency and	Annually

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	take precautionary measures as determined by the findings of this monitoring regime	
	Check water temperatures at an outlet to confirm the heater operates at 50–60 °C	Monthly
Cold water tanks	Inspect cold water storage tanks and undertake remedial work where necessary	Annually
	Check the tank water temperature remote from the ball valve and the incoming mains temperature. Record the maximum temperatures of the stored and supply water recorded by fixed maximum/minimum thermometers where fitted	Annually (Summer) or as indicated by the temperature profiling
Cold water services	Check temperatures at sentinel taps (typically those nearest to and furthest from the cold tank, but may also include other key locations on long branches to zones or floor levels). These outlets should be below 20 °C within two minutes of running the cold tap. To identify any local heat gain, which might not be apparent after one minute, observe the thermometer reading during flushing	Monthly
	Take temperatures at a representative selection of other points to confirm they are below 20 °C to create a temperature profile of the entire system over a defined time period. Peak temperatures or any temperatures that are slow to fall should be an indicator of a localised problem	Representative selection of other sentinel outlets considered on a rotational basis to ensure the entire system is reaching satisfactory temperatures for legionella control
	Check thermal insulation to ensure it is intact and consider weatherproofing where components are exposed to the outdoor environment	Annually
Showers and spray taps	Dismantle, clean, and descale removable parts, heads, inserts and hoses where fitted	Quarterly or as indicated by the rate of fouling or other risk factors, e.g., areas with high risk patients
POU filters	Record the service start date and lifespan or end date and replace filters as recommended by the manufacturer (0.2 $\mu$ m membrane POU filters should be used primarily as a temporary control measure while a permanent safe engineering solution is developed, although long-term use of such filters may be needed in some healthcare situations)	According to manufacturer's guidelines
Base exchange softeners	Visually check the salt levels and top up salt, if required. Undertake a hardness check to confirm operation of the softener	Weekly, but depends on the size of the vessel and the rate of salt consumption
	Service and disinfect	Annually, or according to manufacturer's guidelines

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Multiple use filters	Backwash and regenerate as specified by the manufacturer	According to manufacturer's guidelines
Infrequently used outlets	Consideration should be given to removing infrequently used showers, taps and any associated equipment that uses water. If removed, any redundant supply pipework should be cut back as far as possible to a common supply (e.g. to the recirculating pipework or the pipework supplying a more frequently used upstream fitting) but preferably by removing the feeding 'T' Infrequently used equipment within a water system (i.e. not used for a period equal to or greater than seven days) should be included on the flushing regime Flush the outlets until the temperature at the outlet stabilises and is comparable to supply water and purge to drain Regularly use the outlets to minimise the risk from microbial growth in the peripheral parts of the water system, sustain and log this procedure once started For high risk populations, e.g. healthcare and care homes, more frequent flushing may be required as indicated by the risk assessment	Weekly, or as indicated by the risk assessment
TMVs	Risk assess whether the TMV fitting is required, and if not, remove Where needed, inspect, clean, descale and disinfect any strainers or filters associated with TMVs To maintain protection against scald risk, TMVs require regular routine maintenance conducted by competent persons in accordance with the manufacturer's instructions. There is further information in paragraphs 2.152–2.168	Annually or on a frequency defined by the risk assessment, taking account of any manufacturer's recommendations
Expansion vessels	Where practical, flush through and purge to drain. Bladders should be changed according to the manufacturer's guidelines or as indicated by the risk assessment	Monthly–six monthly, as indicated by the risk assessment

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Legionella bacteria (cfu/l)	Recommended actions
Not detected or up to 100 cfu/l	<b>In healthcare</b> , the primary concern is protecting susceptible patients, so any detection of legionella should be investigated and, if necessary, the system resampled to aid interpretation of the results in line with the monitoring strategy and risk assessment
>100 cfu/l and up to 1000 cfu/l	Either:
	1. if the minority of samples are positive, the system should be resampled. If similar results are found again, review the control measures and risk assessment to identify any remedial actions necessary or
	2. if the majority of samples are positive, the system may be colonised, albeit at a low level. An immediate review of control measures and a risk assessment should be undertaken to identify any other remedial action required. Disinfection of the system should be considered.
>1000 cfu/l	The system should be resampled, and an immediate review of the control measures and risk assessment undertaken to identify any remedial actions, including possible disinfection of the system. Retesting should take place a few days after disinfection and at frequent intervals thereafter until a satisfactory level of control is achieved

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