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HEALTH BOARD AUDIT COMMITTEE				
<b>Meeting Date</b>	<b>12<sup>th</sup> March 2020</b>		<b>Agenda Item</b>	<b>2.3</b>
<b>Report Title</b>	<b>Water Safety Management Update</b>			
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<b>Report Sponsor</b>	Chris White, Chief Operating Officer (COO)			
<b>Presented by</b>	Des Keighan, Assistant Director of Operations – Estates			
<b>Freedom of Information</b>	Open			
<b>Purpose of the Report</b>	This report provides the Audit Committee with an update on progress to address the internal audit report on water safety management published on the 24 <sup>th</sup> May 2019.			
<b>Key Issues</b>	<p>The Safe Water Management (including Legionella) internal audit identified:</p> <ul style="list-style-type: none"> <li>• Procedures publication and circulation inconsistent and not updated</li> <li>• Water management reporting arrangements</li> <li>• Appropriate advisory support from micro-biologist and other specialists</li> <li>• Water schematics not available or up to date</li> <li>• Appointment of competent persons: Responsible Person (RP) and Authorised Person (AP) for water</li> <li>• Appropriate levels of legionella sampling</li> </ul>			
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> the report</li> </ul>			

# WATER SAFETY MANAGEMENT UPDATE

## 1. INTRODUCTION

This report provides the Audit Committee with an update on progress to address the internal audit report on water safety management published on the 24<sup>th</sup> May 2019.

## 2. BACKGROUND

The Water Safety Management audit was commissioned in order to evaluate the associated processes and procedures that support its management and control. The audit assessed compliance with relevant legislation and guidance to manage and minimise the risks to health including clinical risks, microbial and chemical contamination and changes to the water system. There was also emphasis on related staff competencies and implementation of water hygiene awareness training.

A previous audit of the systems and controls in place for the management of legionella was undertaken during 2014/15 and determined a limited level of assurance. Issues raised related to manual systems and requirement for enhanced procedures. These have been addressed by the introduction of automated systems, and procedural update.

The 2018 audit was the first review of the operation of the revised procedures and systems.

The focus of the audit was directed to the following areas: -

- **Procedures** - to ensure that management were implementing applicable procedures (both internal and external requirements).
- **Governance** - the Health Board had adequate arrangements in place to support the implementation of the approved code of practice. Also, that an appropriate policy was in place to address water safety issues, there were defined allocation of responsibilities, clear lines of communication and approval processes
- **Monitoring and Reporting** - to ensure that the Health Board had effective monitoring procedures in place across the estate e.g. the establishment of appropriate Water Safety Groups (WSGs) etc. Assurance that there was appropriate record retention and dissemination of information through to the Executive team and Board.
- **Management** - assurance that relevant staff received appropriate training, and appropriate resources were allocated. Assurance that and an appropriate inspection / detection regime was operating.
- **Risk Management** - Assurance that the Health Board performed a suitable and sufficient assessment of risks; and that risks were appropriately managed.

The system was found to benefit from the several key controls including revised procedures, and a risk assessment refresh. Water temperature testing was directed by Zetasafe which is a automated system, with associated reporting of outcomes and remedial actions. However, key issues included:

- a. Lack of assurance relating to Legionella testing (including non compliance with the testing regimes determined within the UHB's Water Safety Plan);

Since the time of the audit the water safety plan has been updated to reflect our proposed way forward for Legionella testing within the Health Board. We undertake a number of water samples specifically testing for Legionella at both Singleton and Morriston Hospitals. Within the Water Management Group we have agreed the water sampling will be undertaken specifically Legionella and we have identified the high risk area's within each of the sites with one area being tested on a monthly basis to provide a base line for the Health Board.

- b. The lack of formalised risk assessments in the absence of the defined testing regime: -

**Complete** - Risk assessments were completed between 2017 and 2018, the department are in the process of developing a new specification for the provision of risk assessments and it is hoped to complete the tender process early in the financial year.

- c. Procedures should be updated to provide assurance that pseudomonas aeruginosa testing and appropriate cleaning regimes are being undertaken in appropriate areas e.g sink drainage outlets.

**Complete** - Within the audit report they highlighted the fact that the water system plan did not include detailed information around the sampling procedure to be followed as part of the testing for Pseudomonas Aeruginosa which includes the cleaning of the outlet. Since the audit the Water Safety Plan has been updated to include the sampling procedure detailed with in the WHTM.

- d. The audit report stated risks relating to equipment that use /supply water , should be reviewed to ensure that that appropriate risk assessments are in place.

Requests for equipment that use water such as ice machines and chilled water machines are controlled through the water safety group. Approval is dependent on a cleaning and maintenance regimes being in place, and that there is a clinical need for these facilities.

- e. Assurance relating to the flushing of infrequently/unused outlets was not identified;

**Complete** - Since the audit it has been agreed that within clinical area's domestic staff will flush taps as part of the daily cleaning regime. Whilst there is a procedure in place for out-patient area's and non-clinical departments. The Water Safety Group will be reviewing these arrangements.

- f. The need for more effective monitoring and reporting regimes;

**In progress** - Audit felt that the scope of management reports should be reviewed, including: - achievement of test / re-test targets - achievement of scheduled water related maintenance; and what information was being reported to the Health and Safety committee. It was agreed at the last water safety group that in light of the changes to the Health and Safety management arrangements with the introduction of the Water Environment and Building

groups (WEB) that a task and finish group would be established including representatives from Health and Safety, Infection Prevention, Estates and the Authorised Engineer for Water (Wales) to agree what will be reported to these forums.

- g. The need for effective training in system operation.

**In progress** - Audit recommended that there should be sufficient trained officers both to operate local management systems, and address prioritised maintenance; and Governance mechanisms.

Since the time of the audit the Health Board has provided additional training for responsible and authorised persons and a number have now be re-appointed following appraisal by the Authorised Engineer for Water (Wales). The appointment is dependent on providing evidence they have completed an appropriate water management qualification and demonstrate knowledge of the appropriate legislation and procedures to be followed in accordance to the Welsh health Technical Memorandums (WHTM's).

### **3. WATER SAFETY MANAGEMENT – PROGRESS UPDATE**

#### **3.1 Water Safety Management Group (WSMG)**

The Water Safety Group (WSG) is a multidisciplinary group formed from the many departments within SBUHB with collective and individual responsibilities for the safe provision and use of water.

The WSG oversees the management of the Water Systems within all the Health Board premises, focusing on ensuring compliance with all relevant standards and legislation covered by this policy. The purpose of the group is to advise and support on all aspects relating to water safety, including *Legionella* sp. and *P. aeruginosa*. Reporting to the Health & Safety Committee and also provide reports to the Infection Control Committee. The WSMG meets on a quarterly basis.

The function of the Health Board Water Safety Management Group is:

- To ensure identification of microbiological hazards, assessing risks, identifying and monitoring control measures developing protocols.
- To ensure there are systems in place to monitor Water Systems throughout the Health Board premises.
- The group will review the sampling and testing arrangements in place for the Health Board to ensure best value
- Provide a forum in which high level Water System monitoring outcomes and risks can be reported to, evaluated, so that appropriate reduction or elimination action is agreed;
- To act collectively to ensure effective communication of ideas, sharing of experiences and areas of best practice
- Consider identified risks, set priorities and produce action plans for each site.
- Provide regular assurance and exception water reports to the Health & Safety Committee & Infection Control Committee.
- Monitor implementation of national water standard regulations, agree actions and report on the outcomes.

The Chief Executive is the “Duty Holder” in accordance with the ACOP L8 “Legionnaires Disease: the control of Legionella bacteria in water systems”, 4th Edition (2013) with the following responsibilities:

- Has the overall accountability for ensuring compliance with all statutory regulations; is the person primarily responsible for all matters relating to Water Safety within the scope of this Policy

The Chief Operating Officer (COO) acts as the Designated Person (DP) with responsibilities as defined in WHTM 00. The DP has responsibility for ensuring suitable arrangements are in place to meet the requirements of associated guidance adopted within SBUHB Water Safety Policy – see **Appendix 1** and associated Water Safety Plan.

The Assistant Director of Operations (Estates) is the designated “Responsible Person” with the following responsibilities:

- Accept responsibility for the Management and Control of Legionnaires’ disease and safe hot water management throughout the Estate.
- With the assistance of the DRPs and the WSMG, prepare and implement a Water Safety Plan.
- Ensure that risks are assessed and that necessary precautions are applied.
- Instruct and supervise the completion or review of suitable and sufficient risk assessments in accordance with HSE ACOP L8 (2013) and WHTM 04-01.
- Make appointments of SAP’s, and AP’s.
- Consider the risk assessment findings and prioritise any remedial works with the assistance of the DRP and the WSMG.
- On an annual basis, assess the training needs of the DRPs, SAPs/APs report to WSMG and arrange any appropriate training if required.

### **3.2 Water Safety Improvement Plan 2019-2020**

Following receipt of the internal audit report on water safety management a Water Safety Action Plan was devised to plan and capture the tasks required to address the recommendations outlined within the report. The Water Safety Management Improvement 2019-2020 plan is presented at **Appendix 1**.

## **4. GOVERNANCE AND RISK ISSUES**

To ensure that the Health Board had effective monitoring procedures in place across the estate. Water Safety Procedures state that:

- the **Quality & Safety Committee** will “..receive assurance regarding Water management arrangements through the Health and Safety committee report which will include an update on Water management issues”.
- the **Health & Safety Committee** will “review and consider ..water management issues....receive exception reports from unit Directorates on water matters and remedial and preventative action taken...develop systems to monitor... and (take) remedial and preventative action taken”; and “appoint subcommittees”.
- the **Water Safety Group (WSG)** has delegated responsibility to ensure that effective monitoring systems operate and are effectively monitored and reported

## **4.1 Estates Risk Register**

### **Legionella testing**

The audit recommendations highlighted the need to increase Legionella testing. However, changes in the Welsh health technical memorandum for water safety has increased some of the frequencies of maintenance required on water management systems. The Estates Department has this logged on its risk register and is in the process of implementing periodic testing for legionella, with sample already completed for Singleton and parts of Morriston Hospitals.

### **Appointment of RP & AP's**

A number of AP and RP's have undertaken water management update training, and have had their formal interviews with the Authorising Engineer for Water from the NHS Wales Shared Services Partnership (NWSSP).

### **Drawings**

There are a number of areas within the health board that we don't have adequate service drawings in particular the new HVS and CAB at Morriston Hospital. This is being pursued by Capital colleagues. However, this is subject to the contractual problems the Health Board has had concerning these developments.

### **Water Management Issues**

There are a number of sites within the Health Board specifically Morriston and Cefn Coed where we have clear water management issues, due to the lay out, age or use of the site. These are being addressed as the Health Board rationalises its estate and will be reviewed as part of the risk assessments to be undertaken later this year.

## **5. FINANCIAL IMPLICATIONS**

There are no direct financial implications arising from this report.

## **6. RECOMMENDATION**

Members are asked to:

- **NOTE** the report

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
Water management is covered by the health and safety executives L8 approved code of practice and is a statutory requirement ensuring we have safe water systems is of paramount importance.		
Financial Implications		
Changes in legislation mean there is a greater requirement to test and monitor water systems. The Department has highlighted the fact that it does not have sufficient staff to undertake all the checks in accordance with the new guidance however this has been placed on our risk register and discussions are ongoing with the director to try to secure additional funding to support water management within the health board.		
Legal Implications (including equality and diversity assessment)		
<p>Water safety management is a key aspect of the protection of the health of patients, visitors and staff in accordance with UK health &amp; safety law and regulatory guidance, including:</p> <ul style="list-style-type: none"> <li>• The HSE ACOP "The Control of Legionella Bacteria in Water Systems" L8 (4th edition 2013).</li> <li>• The Management of Health &amp; Safety at Work Regulations 1999.</li> <li>• Public Health (Infectious Diseases) Regulations 1988;</li> <li>• Food Safety Act 1990</li> <li>• The Water Supply (Water Fittings) Regulations 1999.</li> <li>• HSG274 Part 2 Published 2014: The Control of Legionella Bacteria in Hot and Cold Water Systems.</li> <li>• BS 8580:2010: Water quality. Risk assessments for Legionella control. Code of practice</li> </ul>		

- BS8558: guide to design, installation and maintenance of services supplying water for domestic use within buildings and their curtilages.
- BS 8551 – ‘Provision and management of temporary water supplies and distribution networks (not including provisions for statutory emergencies). Code of practice’.
- Health & Safety Executive (2013) Legionnaires’ disease;
- The control of legionella bacteria in water systems,
- Approved Code of Practice & Guidance on Regulations (L8)
- Health & Safety Executive (2014) Legionnaires’ disease;
- Part 2 The control of legionella bacteria in hot and cold water systems (HSG 274 Part 2)
- Health & Safety Executive (2013) Legionnaires’ disease; Part 3: The control of legionella bacteria in other risk systems (HSG 274 Part 3)
- Department of Health (2006); Water Systems Health Technical Memorandum 04-01: The Control of Legionella, hygiene, “safe” hot water, cold water and drinking water Part A: Design, Installation & Testing
- Department of Health (2006); Water Systems Health Technical Memorandum 04-01: The Control of Legionella, hygiene, “safe” hot water, cold water and drinking water Part B: Operational Management
- Department of Health (2006); Water Systems Health Technical Memorandum 04-01: Addendum; Pseudomonas Aeruginosa – advice for augmented care units
- Department of Health (2009); Water Systems Health Technical Memorandum 01-05: Decontamination in primary care dental practices
- National Health Service (1997); Model engineering specifications D08 Thermostatic mixing valves (Healthcare Premises)
- British Standards Institute (2011): BS8558:2011 Guide to the design, installation, testing and maintenance of services supplying water for domestic use within buildings and their curtilages – Complimentary guidance to BS EN 806
- British Standards Institute (2010): BS8580:2010 Water Quality – Risk assessments for Legionella Control – Code of Practice
- British Standards Institute (2008): BS7592:2008 Sampling for Legionella bacteria in water systems – Code of Practice
- NHS Estates (1998); ‘Safe hot water and surface temperatures; Health Guidance Note
- Thermostatic Mixing Valve Manufacturer’s Association (2000); Recommended Code of Practice for Safe Water Temperatures
- Department of Health (2013); Health Building Note 0-09 Infection Control in the Built Environment
- Chartered Institution of Building Services Engineers (2013); TM13:2013 Minimising the risk of Legionnaires’ disease

#### **Staffing Implications**

A separate report is being developed by the Estates department to consider additional resource requirements for the department.

#### **Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)**

The provision of safe water supplies is fundamental in the prevention of illness in patients and staff alike.



<b>Report History</b>	-
<b>Appendices</b>	<b>Appendix 1</b> – Water Safety Management Improvement 2019-2020