



WATER SAFETY POLICY

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Contents

- 1.0 Introduction**
- 2.0 Objectives**
- 3.0 Roles & Responsibilities**
- 4.0 Policy Implementation**
- 5.0 Management Plan**
- 6.0 Inspection and Monitoring**
- 7.0 Domestic Dwellings**
- 8.0 Void Properties**
- 9.0 Record Keeping**
- 10.0 Regulatory standards, legislation, and Approved Codes of Practice**
- 11.0 Vulnerability Assessments**
- 12.0 Discovering water safety hazards in any of our Independent Living schemes**
- 13.0 Review**

WATER SAFETY POLICY

1.0 Introduction

This policy outlines how we protect the health and safety of our residents, employees, and members of public from the exposure of harmful substances in water systems. We aim to protect the occupiers of our properties, visitors, staff, contractors, and the general public, from the risks associated with water hygiene so far as is reasonably practicable. This document sets out key policy objectives, control measures and accountabilities to protect residents, staff, and contractors from harm.

- 1.1 Legionnaires' disease is a potentially fatal form of pneumonia. Everyone is susceptible to infection. Some people are at higher risk
- 1.2 Legionnaires' disease is contracted by inhaling small droplets of water (aerosols), suspended in the air, containing the bacteria. Certain conditions increase the risk from legionella.

2.0 Objectives

- 2.1 We are a 'duty holder' as defined by the Control of Substances Hazardous to Health Regulations, and the Approved Code of Practice (ACOP) L8. We will take precautions to reduce the risks of people being exposed to legionella by:
 - Identifying and assessing sources of risk
 - Managing any risks
 - Preventing or controlling any risks
 - Keeping and maintaining the correct records
 - Carrying out any other duties as required.
- 2.2 This Policy relates to our employees, residents, contractors, stakeholders and other persons who our activities or services affect.
- 2.3 It covers all properties where we hold a maintenance and repairing responsibility.

3.0 Roles & Responsibilities

- 3.1 The Director of Operations oversees:
 - Sign-off and agreement of all Health & Safety (H&S) policies and retains overall accountability for this Policy and implementation
 - Responsibility for ensuring adequate resources are made available to meet the Policy objectives and directing RHS in meeting the requirements of relevant legislation
 - Ensuring the Policy is reviewed and updated in line with legislation
- 3.2 The Asset Manager is responsible for delivery of the key Policy objectives and for achieving the associated targets and will be assigned as the Responsible Person.
- 3.3 The Repairs & Compliance Officer is responsible for operational delivery and will be assigned as the Deputy Responsible Person

4.0 Policy implementation

- 4.1 We will:
 - Appoint one or more Responsible Persons to manage our water hygiene responsibilities

WATER SAFETY POLICY

- Carry out a suitable and sufficient Water Hygiene and Legionella Risk Assessment (LRA) on all relevant properties
- Record the significant findings of each risk assessment
- Produce and implement written schemes of control, as necessary
- Keep appropriate records of any management and associated monitoring activities
- Allocate sufficient resource to manage water hygiene
- Provide information, instruction, training, and supervision to relevant employees to enable them to perform their duties
- Carry out an LRA on all new blocks following handover
- Ensure all works on our water systems are carried out by suitably competent persons
- Implement an appropriate audit and assurance programme
- Report our performance to the Regulator for Social Housing
- Provide our residents with appropriate information to help them contribute to the control of legionella in their homes. Information and advice is also provided on our website.

5.0 Management Plan

- 5.1 We will carry out an LRA on all offices, commercial buildings, blocks with communal areas, and blocks with a shared water system.
- 5.2 We will only permit a competent person to carry out our LRAs. We will only use specialist legionella contractors who are registered with the Legionella Control Association (LCA).
- 5.3 LRAs will be carried out in accordance with guidance document HSG274 and BS8580-1:2019.
- 5.4 We will record all remedial works in an electronic database and track them through to completion.
- 5.5 We will complete a new LRA when there is reason to suspect it is no longer valid.
- 5.6 We will not carry out individual LRAs to domestic dwellings unless there are exceptional circumstances. We will carry out on-going monitoring and sampling activities as dictated by the LRAs, other than within the individual flats.
- 5.7 We will review all risk assessments every five to ten years (depending on water system) and specifically when there is reason to believe that the original risk assessment may no longer be valid.
- 5.8 We will complete actions arising from LRAs and periodic monitoring within the timescales recorded, other than those suggested by the competent person that can be deferred to the next monitoring visit or RA.
- 5.9 We will measure action resolution times from the date the competent person completes the risk assessment on-site.
- 5.10 Actions will be completed within the following timescales:

Risk	Timeframe (within)
Urgent	Seven days
High risk	Three months
Moderate risk	Six months
Low risk	12 months

WATER SAFETY POLICY

6.0 Inspection and Monitoring

6.1 We will conduct inspection and monitoring activities as set out below:

Frequency	Activity	By
Weekly	We will conduct inspection and monitoring activities as set out below:	Contractor and recorded on our internal systems
Monthly	Temperature checks of calorifier flow and return, sentinel and communal outlets	
Quarterly	Clean, descale and sterilise shower heads	
Six-monthly	CWST visual inspection (Independent Living schemes) Sampling in high-risk properties Expansion vessel flushing	
Annually	Sampling, hot water calorifier inspection, TMV servicing, visual inspection of CWSTs 12-monthly check of dwellings (in blocks) tap temperatures on rotational basis where served by a shared system	

7.0 Domestic Dwellings

7.1 RHS recognises that all water systems require risk assessment but due to the different types of property owned and managed, including a high number of single dwellings with small water systems having a high turnover of water, a different approach to risk assessment is required.

7.2 We consider the risks from hot and cold-water systems in most domestic properties with no shared water system to be low. This is owing to regular water usage and turnover.

7.3 We will implement simple, proportionate, and appropriate control measures to ensure the risk remains low.

8.0 Void Properties

8.1 We will implement simple, proportionate, and appropriate control measures to ensure the risk remains low.

8.2 We will put in place an appropriate regime to ensure the risk of legionella is controlled in long term void properties, i.e. total drain down of the system.

9.0 Record Keeping

9.1 We will keep appropriate and up to date records and certification relating to the management of Legionella.

9.2 We will keep records in line with our GDPR Policy.

10.0 Regulatory standards, legislation, and Approved Codes of Practice

10.1 The principal legislation applicable to this Policy is:

- Health and Safety at Work etc. Act, 1974
- The Management of Health and Safety at Work Regulations 1999

WATER SAFETY POLICY

- The Control of Substances Hazardous to Health Regulations 2002

10.2 The principal Approved Code of Practice applicable to this Policy is:

- L8 - 'Legionnaires' disease: The control of legionella bacteria in water systems' (4th edition 2013).

10.3 The principal guidance documents applicable to this Policy are as follows:

- 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)
- INDG458 - Legionnaires' disease: A guide for duty holders Leaflet (HSE Books 2012).

10.4 We will comply with the Regulator of Social Housing's Home Standard.

10.5 We will only use Water Regulations Approval Scheme (WRAS) approved products.

11.0 Vulnerability Assessments

11.1 We recognise some residents may need adjustments due to a language barrier, disability, cultural need, or vulnerability. In these circumstances, in line with our Vulnerability Policy, we'll work with residents to ensure we consider their specific needs, on a case-by-case basis, provided it doesn't compromise health and safety to individuals or homes.

This includes working in partnership with other agencies to ensure we manage and mitigate any known risks of safety and wellbeing.

12.0 Discovering water safety hazards in any of our Independent Living schemes

12.1 If a case of water borne disease is confirmed in a resident / visitor at one of our Independent Living schemes, we will investigate to determine the cause. Checks will determine whether the case is part of an outbreak or cluster, home related or part of a hospital acquired infection.

12.2 If external causes are ruled out, we will investigate whether the communal water systems have been unused for several days before the onset of illness and refer to the most recent LRA.

12.3 The AM will:

- Liaise with the Independent Living Manager and consider evacuating or isolating part of the scheme
- Arrange for an accredited contractor to carry out an urgent survey and risk assessment within 24 hours

12.4 If the results confirm the tanks are the cause of the outbreak the AM will:

- Refer to our Business Continuity Plan (BCP) to agree an action plan and instigate remedial control measures to prevent the further spread of symptoms
- Ensure the Independent Living Manager seeks medical assistance for anyone impacted
- Review the contractors report and take immediate action where required

WATER SAFETY POLICY

12.5 The following measures may be considered:

- Short term evacuation or use of a guest room or void where appropriate
- Apply reassurance and consider wider communications ie press enquiries / relatives
- Notify our insurers and record all actions taken
- Conduct safety checks to confirm whether it's safe to return occupants to the property. The Decant Policy may be implemented should there be a longer-term risk involved
- Other low risk / potential sources ie shower head cleansing

12.6 If required, the Operations Director will inform the CEO to advise legislative authorities under RIDDOR responsibilities.

13.0 Review

13.1 This policy will be formally reviewed every two years. A formal review may be carried out earlier if there have been changes to legislation, or any other relevant changes in regard to health and safety, which could impact this Policy.