

Policy title	Water Hygiene Management Policy
Directorate	Asset Management
Author	Callum Jones – Head of Building Safety & Compliance
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Policy Scope/Users	MSV staff and External Contractors
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1 Introduction/policy purpose

- 1.1 The overall aim of this policy, and the associated management plan, procedures and control documents, is to ensure the safety from infection from water systems and installations (including legionella bacteria) for people living and working in properties, owned or managed by Mosscares St Vincent's [MSV].

MSV aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with water systems so far as is reasonably practicable.

This document sets out key policy objectives, control measures and accountabilities for reducing risk from water supply and installation systems.

The purpose of this policy is to ensure MSV meets its obligations under the following legislation:

- The Health and Safety at Work etc. Act 1974;
- The Management of Health and Safety at Work Regulations 1999
- Control of Substances Hazardous to Health (COSHH) Regulations (as amended) 2002
- The Housing Act 2004 which introduced the Housing Health and Safety Rating System (HHSRS) and the Housing Health and Safety Rating System Regulations 2005.
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- The Water Supply (Water Fittings) Regulations 1999 S I 1999
- The Water Supply (Water Fittings) (Amendments) Regulations 1999.

and recognises the following Approved Codes of Practice (ACoP) and guidance:

- Approved Code of Practice (ACoP) L8 – 'Legionnaires Disease: The Control of Legionella Bacteria in Water Systems' Approved Code of Practice.
- HSG 274 Part 2: The Control of Legionella Bacteria Hot & Cold Water Systems
- HSG274 Parts 3 The Control of Legionella Bacteria in Other Risk Systems
- BS 8580-1:2019 - Water Quality - Risk assessments for Legionella control
- BS 8580-2:2022 Water quality - Risk assessments for Pseudomonas aeruginosa and other waterborne pathogens.

The application of this Policy ensures that MSV meets compliance with the outcomes of the Regulatory Framework for Social Housing in England introduced by the Homes and Communities Agency as outlined below:

(Registered Providers must) meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes)

2 Description of the Policy

2.1 This policy applies to all properties owned or managed by MSV.

2.2 The key MSV policy objectives are:

1. Appoint a Responsible Person whose duty is to ensure the Water Hygiene Management Plan (WHMP) is in place to minimise the risk of legionella and to manage and monitor the necessary work systems and procedures.
2. Carry out a Portfolio Risk Assessment (PRA) for all assets owned or managed by MSV to identify, where practicable, buildings where conditions may be present that encourage legionella bacteria to multiply and/or disperse and assign the appropriate risk classification to these assets as defined in the WHMP.
3. Carry out a Legionella Risk Assessment (LRA) on the assets where required as defined in the WHMP to identify and resolve hazards relating to risk of infection.
4. Use the outcome from the LRA to arrange programmes of routine inspection and testing of water systems and equipment, including, where needed, a programme of modification to any deficient systems and equipment as defined in the WHMP.
5. Ensure that for dwellings left vacant for extended periods of time a suitable drain-down or flushing regime is put in place to prevent the potential build-up of risk conditions as defined in the WHMP.
6. Establish and keep up-to-date, a record of the water systems and installations, risk assessments, maintenance, inspection and testing (The "Register").
7. Introduce an approach to ensuring risk information is provided to those affected including customers and stakeholders.
8. Annually review the job profiles, skills, knowledge and experience of those staff involved in the delivery of this policy and, where necessary, provide training so that they can deliver this policy.

3 Roles, Responsibility and Policy implementation

- 3.1 The accountabilities for implementation of this policy are as set out below:
1. The Chief Executive retains overall accountability for the implementation of this policy.
 2. The Executive Director - Homes is responsible for overall policy implementation and ensuring that adequate resources are made available to enable the objectives of the policy to be met.
 3. The Head of Building Safety & Compliance is responsible for delivery of the key policy objectives as set out herein including designing and implementing procedures, staff training, and communication to customers.
 4. The Compliance Manager is responsible for delivery of the key policy objectives as set out herein including designing and implementing procedures, staff training, and communication to customers.
 5. The Compliance Manager is responsible for maintaining the Registers and accountable for achieving the targets associated with the key policy objectives.
 6. The Compliance Manager is responsible for operational delivery, including the management of contractors carrying out routine maintenance, testing and remedial works and updating Registers as appropriate.
 7. Neighbourhood Services and Care and Support staff shall support asset management and contractors teams in gaining access to carry out legionella related works and maintenance.
 8. The Head of Building Safety & Compliance is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations.

4 Monitoring, Review and Evaluation

4.1 MSV will monitor implementation of this policy using a set of performance measures as below:

Measure	Target	Reporting Interval	Reviewed by
% of known risks which have been assessed	100%	Monthly	Compliance Manager - Weekly The Head of Building Safety & Compliance - Monthly Board - Quarterly
% assets which have been reviewed in accordance with level of risk and appropriate timescales	100%		
% assets with all actions/control measures completed within relevant timescales	100%		

Policy implementation will be reviewed:

1. Monthly by the Head of Building Safety and Compliance via SLT.
2. At each Board meeting via the regular Property Compliance report.
3. By the MSV external & internal audit teams, as required, and a report provided to the Audit Committee/H&S Committee.

The operational oversight of this policy will sit at the Strategic Health & Safety Steering Group.

5 Related documents

- 5.1 *The Water Hygiene Management Plan (WHMP)*
- 5.2 *Appendices 1-19*