

Legionella Management Policy

Date of approval	11th January 2023	
Responsible director	Paul Butterworth – Executive Director of Assets	
Policy monitoring body	Great Places Panel and WCHG Board	
Resident input into policy	Consultation with Great Places Panel, approval by CX Committee	
Date for policy review	January 2026	
Linked strategies/policies	 Legionella Procedure Health and Safety Policy Critical Incident Report and Escalation Procedure Equipment Servicing Policy Empty Homes Policy 	
Statutory and Legal Framework	Approved Code of Practice (ACoP) and Guidance (L8) (Fourth Edition 2013)	
Version/date	DRAFT Final – 18th January 2023	

Legionella Management Policy

1. Background

- 1.1. Wythenshawe Community Housing Group (WCHG) was formed in 2013 as a result of Willow Park Housing Trust and Parkway Green Housing Trust coming together with a combined stock value of almost 14,000 properties.
- 1.2. WCHG's primary aim is to provide homes which are safe, secure, comfortable and well maintained.
- 1.3. The aim of this document is to set out a definitive set of policy commitments for the control and management of Legionella bacteria in water systems in any properties or premises owned or managed by WCHG.
- 1.4. The policy has been developed to ensure WCHG complies with the requirements of the Health and Safety Executive (HSE) Approved Code of Practice (ACoP) and Guidance (L8) for the control of Legionella Bacteria in Water System (Fourth Edition 2013).
- 1.5. This policy fits within a broader commitment to the general management of health and safety as set out in the WCHG Health and Safety Policy.

2. Policy Statement

- 2.1. WCHG accepts it has a responsibility under the Health and Safety at Work Act and the Control of Substances Hazardous to Health Regulations to take all reasonable precautions to prevent or control the harmful effects of contaminated water (i.e. Legionella) to residents, employees and other persons working at or using its premises.
- 2.2. The aim of this policy is to introduce to WCHG a structured Procedure and reporting schedule for the Management and Control of Legionella in compliance with current Guidelines as outlined in the Health and Safety Executive (HSE) Approved Code of Practice (ACoP) and Guidance (L8) for the control of Legionella Bacteria in Water System (Fourth Edition 2013).

2.3. Legionella Definition

Legionellosis is a collective term for diseases caused by legionella bacteria including the most serious Legionnaires' disease, as well as the similar but less serious conditions of Pontiac fever and Lochgoilhead fever. Legionnaires' disease is a potentially fatal form of pneumonia and everyone is susceptible to infection.

The bacterium Legionella pneumophila and related bacteria are common in natural water sources such as rivers, lakes and reservoirs, but usually in low numbers. They may also be found in purpose-built water systems such as cooling towers, evaporative condensers, hot and cold water systems and spa pools.

- 2.4. WCHG will put in place the following actions to ensure those buildings, as identified within Appendix A are addressed:
 - Identify and assess sources of risk.
 - Prepare a scheme for preventing, reducing or controlling the risk.
 - Implement and manage precautions.
 - Keep records of the precautions implemented and will do so for each of the premises detailed within WCHG's control.
 - Ensure the water supply/system within each Void is addressed prior to handover by the Voids team and recording mechanisms of this action are in place.
 - Monitor the performance of the nominated Contractor who manages the properties on behalf of WCHG.
 - Hold regular Contract meetings to monitor the contractor's performance with regards to Legionella Management.
 - Ensure, in the event of a Legionella detection or a Legionella outbreak, the guidelines for The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR), set out under Section 18 of the Health and Safety Executive (HSE) Approved Code of Practice (ACoP) and Guidance (L8) for the control of Legionella Bacteria in Water System (Fourth Edition 2013) are adhered to.
 - The WCHG Critical Incident Report and Escalation Procedure is enforced in the event of a Legionella detection or a Legionella outbreak.
 - Ensure performance in relation to Water Management is reported to the Tenant Committee and Board on a monthly basis by inclusion within the Monthly Corporate Performance Pack.
 - Appendix A will be updated as and when locations are added or removed in order that this list be accurate at all times.

3. Roles and Responsibilities

3.1. WCHG The Board and Executives

- 3.1.1.The WCHG Board of Management has overall responsibility for the safety of all of the organisation's activity and appoints an executive officer to ensure the organisation operates safely and complies with all statutory, legislative and regulatory requirements.
- 3.1.2.As part of the responsibilities detailed in this document the Executives will ensure compliance by:
 - Reviewing and agreeing the Policies and Procedures to be implemented by WCHG.
 - Ensuring the staffing structure is adequately resourced with competent persons nominated to oversee and manage all works associated with the management of Legionella in WCHG premises.
 - Ensuring sufficient financial and staffing resources are available to enable those procedures to be implemented and maintained.

3.2. The Senior Contract Manager

- 3.2.1. The Senior Contract Manager is the Responsible Officer and the Facilities Manager and operational staff within the Facilities team will be responsible for the day to day management of the water testing, temperature recording and Legionella control service.
- 3.2.2. The Senior Contract Manager will ensure that any person(s) undertaking assessments, training or developing measures to remove the potential risk of Legionella occurring in premises owned or managed by the Organisation will be deemed competent.
- 3.2.3. The Competent Person(s) does not need to be a direct employee of WCHG however WCHG must ensure the competency of any external persons, contractors of consultants appointed to this role.
- 3.2.4. Any specialist contractor of consultant must be Legionella Control Associated approved and must provide evidence as to the competency of any employee they allocate to work on WCHG's behalf.
- 3.2.5. It is the Facilities Manager's responsibility to develop and maintain a register of these operatives and their competency.

3.3. Competent Persons

- 3.3.1. Section 29 of the Health and Safety Executives (HSE) Approved Code of Practice (ACoP) and Guidance (L8) for the control of Legionella Bacteria in Water Systems (Fourth Edition 2013) states that the Duty Holder must ensure that the person who carries out the Risk Assessment and provides advice on the prevention and control of exposure must be competent to do so.
- 3.3.2. The appointed Competent Person(s) will ensure that systems are implemented that:
 - Identify and assess any sources of risk.
 - Prepare a course of action for preventing and controlling that task.
 - Implement a safe system of working.
 - Keep records of any measures or testing undertaken at every site.
 - WCHG must ensure that any person(s), contractor or consultancy appointed to this role has complied with this requirement and can complete their tasks competently.

4. Legionella Risk Assessment

- 4.1. A Risk Assessment shall be undertaken by Competent Person(s) in accordance with guidance outlined in Sections 38 to 47 of the Health and Safety Executives (HSE) Approved Code of practice (ACoP) and Guidance (L8) for The Control of Legionella Bacteria in Water Systems (Fourth Edition 2013).
- 4.2. The detail of these works and the associated specifications for the work are detailed in the WCHG document Legionella Management Procedures

5. Maintenance Requirements

- 5.1. On completion of the Risk Assessments a Maintenance Plan or Service Schedule will be developed to identify the works and checks that are required and the frequency at which these works/checks should be undertaken and by whom.
- 5.2. The detail of these works and the associated specifications for the work are detailed in the WCHG document Legionella Management Procedures.

6. Audit

- 6.1. Periodic Audits will be undertaken the purpose of this audit is to ensure that:
 - No significant modifications have been undertaken to the design of the system.
 - The Maintenance Plan is being carried out in accordance with the agreed timescales.
 - In the event of any changes in Legislation the plan is amended to incorporate these changes.
 - Any outstanding works have been actioned 30% sample.
 - The Electronic System (Promaster) is being updated to reflect the completion of works/checks.

7. Legionella Outbreak / Positive Test Result

- 7.1. In the event of a positive test result for Legionella or a Legionella outbreak at any premises owned or managed by WCHG a plan of action has been developed.
- 7.2. Details of these actions are contained in the WCHG document 'Legionella Management Procedure' which is available to all staff on the Corporate Intranet.
- 7.3. The WCHG Critical Incident Reporting and Escalation Procedure will be invoked in such circumstances.
- 7.4. Reporting procedures (RIDDOR) will be adhered to as outlined in Section 18 of the Health and Safety Executive (HSE) Approved Code of Practice (ACoP) and Guidance (L8) for the control of Legionella Bacteria in Water System (Fourth Edition 2013)

8. Review and Continuous Improvement

- 8.1. WCHG will ensure that the arrangements set out in this policy represent a robust approach to the management of the risk of Legionella.
- 8.2. A bi-annual review of this policy and associated arrangements, procurements and processes will take place and WCHG will continually look at ways to further strengthen and improve our approach.
- 8.3. WCHG will ensure that sufficient financial resources are in place as part of the annual budgeting process to deliver the Legionella policy and Procedures. Monthly corporate

- performance and compliance reporting will take place by the Facilities Manager to ensure compliance with this policy.
- 8.4. The Facilities Manager supported by the Health and Safety Manager will track the Regulations and incorporate any changes that may become necessary.
- 8.5. Any changes made will be incorporated into future versions of this policy and be formally approved by the Group Leadership Team and the Board.
- 8.6. As a matter of course, this policy will be subject to formal review prior to the anniversary of the review date.

9. Equality, Diversity and Inclusion

- 9.1. WCHG recognises that colleagues of all races, ages, religions, gender, sexual orientation, literacy levels and disability should be treated equally and fairly. We will make every reasonable effort to ensure that no-one is discriminated against directly or indirectly on the basis of any protected characteristic as defined by the Equality Act 2010. We recognise that some protected groups may be disproportionately impacted and will take additional steps in the application of this policy and make reasonable adjustments to ensure compliance with the Act
- 9.2. An Equality Impact Assessment has been carried out on this policy.

Appendix A

Community Centre
High Rise
Supported Living
High Rise
High Rise
High Rise
Extra Care
Office
Office
Community Room
НМО
НМО
Sheltered Housing
Community Centre
Community Centre
Supported Housing
Supported Housing
High Rise
High Rise
High Rise
High Rise

1-87 Edwards Court	High Rise
Property Services – Greenwood Road	Office
301 Greenbrow Road	General Needs Flats
20 Lord Morris Court	General Needs Flats
Unit E	Food Bank
Void Properties (over 30 days)	House/Flat/Bungalow