

**To: Members of the Special Sub-Group**

**Councillors Clews, Chapman, Farrow, Jenns, Ririe and Watson**

**For the information of the other Members of the Council**

For general enquiries please contact Democratic Services on 01827 719221 or via email – [democraticservices@northwarks.gov.uk](mailto:democraticservices@northwarks.gov.uk)

For enquiries about specific reports please contact the officer named in the reports.

This document can be made available in large print and electronic accessible formats if requested.

## **SPECIAL SUB-GROUP**

**9 JANUARY 2024**

The Special Sub-Group will meet on Tuesday, 9 January 2024 at 6.30pm in the Council Chamber at The Council House, South Street, Atherstone, Warwickshire.

The Meeting can also be viewed on the Council's YouTube channel at: [NorthWarks - YouTube](#)

### **AGENDA**

- 1 Evacuation Procedure**
- 2 Apologies for Absence / Members away on official Council Business.**
- 3 Disclosable Pecuniary and Non-Pecuniary Interests**

#### 4 **Public Participation**

Up to twenty minutes will be set aside for members of the public to put questions to elected Members. Questions should be submitted by 9.30am two working days prior to the meeting. A period of five minutes will be allowed for each question to be answered.

Members of the public wishing to address the Board must register their intention to do so by 9:30am two working days prior to the meeting. Participants are restricted to five minutes each.

If you wish to put a question to the meeting, please register by email to [democraticservices@northwarks.gov.uk](mailto:democraticservices@northwarks.gov.uk) or telephone 01827 719221/719226/719237.

Once registered to speak, the person asking the question has the option to either:

- (a) attend the meeting in person at the Council Chamber.
- (b) attend remotely via Teams; or
- (c) request that the Chair reads out their written question.

The Council Chamber has level access via a lift to assist those with limited mobility who attend in person however, it may be more convenient to attend remotely.

If attending remotely an invitation will be sent to join the Teams video conferencing for this meeting. Those registered to speak should dial the telephone number and ID number (provided on their invitation) when joining the meeting to ask their question. However, whilst waiting they will be able to hear what is being said at the meeting. They will also be able to view the meeting using the YouTube link provided (if so, they made need to mute the sound on YouTube when they speak on the phone to prevent feedback).

#### 5 **Health & Safety Policies** – Report of the Interim Corporate Director - Resources

##### **Summary**

This report advises members of the background to the revised Health, Safety & Welfare Policy and new Fire Safety Policy and recommends the adoption of the policies for the Council. The trade unions have been consulted on the policies.

The Contact Officer for this report is Kerry Drakeley (719300).

6 **Exclusion of the Public and Press**

**To consider, in accordance with Section 100A(4) of the Local Government Act 1972, whether it is in the public interest that the public and press be excluded from the meeting for the following item of business, on the grounds that it involves the likely disclosure of exempt information as defined by Schedule 12A to the Act.**

7 **Staffing Matter** – Report of the Chief Executive.

The Contact Officer for this report is Trudi Barnsley (719388).

STEVE MAXEY  
Chief Executive

**1 Summary**

- 1.1 This report advises members of the background to the revised Health, Safety & Welfare Policy, Water Management Policy and the new Fire Safety Policy, and recommends the adoption of the policies for the Council. The trade unions have been consulted on the policies.

**Recommendation to the Special Sub-Group**

**To adopt the revised Health, Safety & Welfare Policy, Water Management Policy and the new Fire Safety Policy**

**2 Introduction**

- 2.1 North Warwickshire Borough Council has a Health, Safety & Welfare Policy, in line with the legal requirement included in the Health and Safety at Work Act. The Policy is required to state the general policy on health and safety at work, including the organisation's commitment to managing health and safety, the responsibilities for health and safety, and the arrangements for health and safety.
- 2.2 The Council has existing fire safety controls in place, however does not currently have a formal Policy document detailing the controls and arrangements for fire safety. The Regulatory Reform (Fire Safety) Order 2005 requires this to be in place for organisations with 5 or more employees.
- 2.3 The Council has a Control of Legionella Policy, in line with the legal requirement included in the Health and Safety at Work Act, the Control of Substances Hazardous to Health Regulation and the Approved Code of Practice (ACOP) L8 guidance which outlines controls which may help to prevent the growth of Legionella bacteria.

### 3 Policy Revision

3.1 The Health and Safety Officer is reviewing several existing health and safety policies, and in addition, the requirement for new policies/procedures. As part of that work, the Health, Safety & Welfare Policy has been revised (Appendix A), the Control of Legionella Policy has been renamed to Water Management Policy and updated (Appendix B), and a new Fire Safety Policy created (Appendix C).

### 4 Report Implications

#### 4.1 Finance and Value for Money Implications

4.1.1 None.

#### 4.2 Human Resources Implications

4.2.1 As detailed in the report.

#### 4.3 Equality Implications

4.3.1 As detailed in the report.

#### 4.4 Links to Council's Priorities

4.4.1 Effective management of the workforce contributes to the Council's priority of making the best use of our resources.

The Contact Officer for this report is Kerry Drakeley (719300)

### Background Papers

Local Government Act 1972 Section 100D, as substituted by the Local Government Act, 2000 Section 97

Background Paper No	Author	Nature of Background Paper	Date



North Warwickshire  
Borough Council

# Health Safety and Welfare Policy

January 2024

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# 1. Foreword

To manage health and safety effectively it is important to involve all those who work for North Warwickshire Borough Council, our residents, members, partners and customers.

The key goal of our health and safety management strategies are to reduce accidents, incidents and work related ill health. I have a strong ambition to ensure that all those involved with Council business return from work in as good condition, if not better, than when they started their working day.

North Warwickshire Borough Council's Health, Safety and Welfare Policy identifies our commitment, as an employer, to managing health and safety proactively, with clear roles and responsibilities identified throughout the Council.

We are also committed to creating an environment that supports employee wellbeing; our Health and Wellbeing Policy sets out our approach in the areas of prevention, promotion and support in pursuit of our aim to have a healthy, happy, engaged and thriving workforce that delivers excellent outcomes for service users.

Managers are supported to implement the health, safety and welfare policy, leadership teams are expected to lead by example ensuring that good health and safety is integrated in day to day decision making, strategic planning and processes.

Whilst everyone has a responsibility for their health, safety and welfare, management has an added responsibility to ensure that correct standards for health and safety are implemented and their staff are involved to achieve objectives and set targets.

Employees are responsible for working to the highest possible standards of health and safety in all workplaces and services. Employees are expected to take all reasonable steps to look after their own health and safety, and that of others who may be affected by their actions.

North Warwickshire Borough Council is always developing and working towards excellence, and as such policies will be kept under review and updated, as necessary, to drive the needs of the organisation and meet future changes in legislation.



Steve Maxey

Chief Executive

*Signed*

## 2. Health Safety and Welfare Policy Statement

North Warwickshire Borough Council (NWBC) is committed to ensuring the health, safety and welfare of its employees, so far as is reasonably practicable and also fully accepts its responsibility for other people who may be affected by its activities. It will take steps to ensure that its statutory duties are met at all times.

It is NWBC's responsibility to ensure that all processes and systems of work are designed to take account of Health and Safety and are adequately supervised. NWBC's health and safety management system is the Plan Do Check Act (PDCA) management system advised in the Management of Health and Safety at Work Regulations 1999.

This Policy Statement outlines the systems developed by NWBC to manage health, safety and welfare. It is a declaration of the Council's commitment to provide, so far as is reasonably practicable, safe and healthy conditions for employees and persons, who use, visit or may be affected by the Council's activities.

Our target is to protect employees, customers and all those affected by Council activities from preventable accidents and work-related ill health. This is achieved by:

- Complying with all applicable health and safety and equality legislation.
- Committing to the prevention of ill health and injury across the organisation.
- Providing strong and visible leadership and promote a positive health and safety culture.
- Ensuring that adequate resources are provided for health and safety.
- Working with the PDCA management system to identify and control risk throughout the organisation.
- Identifying significant risks to health and safety and implementing adequate measures to prevent, reduce or protect against those risks through the risk assessment process.
- Identifying and actioning higher risk activities and topics within the organisation.
- Ensuring a competent workforce through the provision of information, instruction, training and supervision.
- Appointing competent people to assist in meeting the Council's statutory duties including, when appropriate, specialists from outside the organisation.
- Ensuring facilities are maintained to allow for safe usage and appropriate provision of welfare
- Providing clear access pathways for employees and their representatives to raise health and safety issues.
- Providing effective communication, consultation and cooperation with employees and key stakeholders on all relevant health and safety matters.
- Ensuring that appropriate monitoring and reviewing processes are in place, to ensure the organisation continually improves health and safety management.
- Setting appropriate targets to meet the objectives of this policy.

All employees must co-operate with the Council to enable its statutory duties are complied with. Each individual has a legal obligation to take reasonable care for their own Health and Safety, and for the safety of other people who may be affected by their acts or omissions.

Detailed information on the organisation and arrangements for Health and Safety are set out in separate policies and guidance documents. This policy will be regularly monitored to ensure that the objectives are achieved. It will be reviewed and, if necessary, revised in the light of legislative or organisational changes.

### **3. Organisational Arrangements**

#### **Overall Responsibility**

The Chief Executive accepts overall responsibility for all matters, including those regarding the health, safety and welfare of his employees (Appendix 1 – Health Safety and Welfare Organisational Chart). The Chief Executive will ensure that the Council's safety policy is effectively implemented and understood at all levels, ensuring that the Corporate Directors / Directors are fully aware of and carry out their Health and Safety responsibilities.

#### **Corporate Directors & Directors**

Accountable to the Chief Executive and have the following responsibilities for health, safety and welfare matters within their division:

- Be satisfied that appropriate health and safety policies are in operation ensuring that they, and their staff, are familiar with the contents of said policies
- To ensure that Council Health and Safety policies and procedures are implemented within their division
- Be familiar with the legislation, codes of practice and safety precautions applicable to their activities
- Ensure adequate resources for Health and Safety are provided
- Be satisfied that risks are appropriately managed and safe working procedures are in place
- Promote a positive approach to health, safety and welfare amongst all staff
- Promote a culture where safe working practices are practiced
- Ensure that all employees, including new starters, are properly trained, competent and understand their responsibilities with regard to safe working practices
- Ensure that managers are fully aware of, and carry out, their Health and Safety responsibilities
- Set a personal example and maintain a level of knowledge regarding matters of Health and Safety
- Ensure that where stipulated in Council policies, key people are appointed and appropriately trained to carry out Health and Safety duties on behalf of the division e.g., risk assessments, fire marshals etc.
- Management meetings should be recorded with the meeting notes circulated and agreed

#### **Corporate Director (Resources)**

In addition to the responsibilities of Corporate Directors, also has the following duties:

- To co-ordinate, administer and develop all aspects of Health and Safety, and encourage specific Health and Safety initiatives
- To ensure that individuals who have been appointed as competent persons, under the Management of Health and Safety at Work Regulations 1999, are provided with sufficient resources and are facilitated in keeping their knowledge of Health and Safety issues and legislation up to date
- When a Health and Safety policy is drafted it should have a timetable for implementation agreed by the Corporate Director (Resources). Responsibility for ensuring this timetable is adhered to and resourced adequately lies with the Corporate Director (Resources)

#### **Managers / Supervisors**

Accountable to their immediate line manager, with the following responsibilities for health, safety and welfare:

- To ensure that they, and their staff are familiar with the contents of relevant Health and Safety policies

- To ensure that Council Health and Safety policies and procedures are implemented within their work area
- Be familiar with the legislation, codes of practice and safety precautions applicable to their activities
- Ensure that employees are aware of Health and Safety, hazards, control measures, safe systems of work applicable to their work activities and observe safe working practices
- Ensure that all employees, including new starters, are properly trained, competent and understand their responsibilities regarding safe working practices
- Ensure that all plant, equipment, products and materials are used correctly and safely, with a system in place for reporting and remedying any defects
- Investigate any accident, incident, near miss or dangerous occurrence and take steps to put in place any remedial action necessary to prevent recurrence
- Seek the advice of the Health and Safety Officer when appropriate
- Set a personal example with regards to Health and Safety matters
- Ensure that employees are fully aware of, and carry out any specific Health and Safety responsibilities
- Management meetings should be recorded with the meeting notes circulated and agreed

### **All Employees**

Accountable to their immediate line manager, with the following responsibilities for health, safety and welfare:

- To make themselves familiar with, and conform to, the Council's Health and Safety policies, working practices and systems of work
- To use correct tools, equipment, controls and personal protective equipment for the job as required
- To co-operate with their line manager and senior management, to work safely and to comply with health and safety instructions and information
- Not to intentionally, or recklessly, interfere with or misuse anything provided in the interests of health, safety and welfare
- Attend health and safety training, briefings or toolbox talks as required
- Report defects in plant or machinery to their line manager immediately
- Report all accidents, incidents, near misses, dangerous occurrences and hazards to their line manager as soon as possible
- Take responsibility for their own Health and Safety and of others who could be affected by their acts or omissions
- Set a positive personal example with regards to Health and Safety matters

## **Competent Person appointed under the Management of Health and Safety at Work Regulations 1999:**

### **Health and Safety Officer**

Accountable to the Human Resources Manager, with the following responsibilities:

- To interpret new and existing Health and Safety legislation on behalf of the Council, and compile relevant Health and Safety policies based on this legislation and relevant guidance
- With the assistance of management, monitor the implementation and effectiveness of Health and Safety policies and procedures
- To review Health and Safety policies and procedures in light of new or amended legislation, outcomes of risk assessments or workplace incidents
- To provide an advisory service to the Council's employees in respect of Health and Safety related matters
- To carry out corporate risk assessments and manage the Risk Assessment policy
- To provide advice and assistance to managers in the carrying out and recording of risk assessments
- To monitor and develop the Council's risk assessment database
- To carry out corporate safety audits and manage the Safety Audit policy
- Monitor the accident and incident rate, carry out investigations where required, and report relevant incidents to the Enforcing Authority
- Be available for consultation on the purchase of new plant, equipment or furniture where there may be safety implications or where a particular policy requires such consultation
- Liaise with management to provide or arrange adequate briefing or training of employees on all Health and Safety issues and legislation
- To liaise and co-operate with Officers of the Enforcing Authorities in pursuance of their duties
- Ensure records of health and safety training are retained, and that refresher training is provided as necessary
- To take an active part in the Health and Safety Working Party meetings and ensure that action is taken on matters arising
- Set a personal example and maintain a relevant level of knowledge in all matters connected with Health and Safety
- To take immediate remedial action, including the cessation of work activities, if an imminent threat to Health and Safety is identified or observed
- Management meetings should be recorded with the meeting notes circulated and agreed

## 4. General Safety Arrangements

### Health and Safety Working Party (HSWP)

The Health and Safety Working Party consists of trade union and employee representatives from each Division. It is chaired by Director of Housing and is attended by the Health and Safety Officer.

The role of the Working Party is to:

- Act as a forum for both union and employees' representatives to raise and discuss Health and Safety issues
- Review the implementation and effectiveness of the Council's Health and Safety policies
- Receive reports on new Health and Safety legislation, codes of practice and case law and the implications for the Council
- Monitor the rates of accidents, near misses, dangerous occurrences and sickness and consider ways in which the situation can be improved
- Provide a positive example to all employees regarding health and safety practices
- Actively promote an awareness of Health and Safety issues amongst employees, providing support where possible
- Monitor the progress on risk assessments and safety audits and to receive reports and action plans

In addition to the HSWP, the Strategic Health and Safety Group (SHSG) is chaired by the Health and Safety Officer and is attended by the Corporate Director Streetscape, Directors of Housing, Leisure and Community Development, and the Human Resources Manager (as required). The overall aim of the SHSG is to assist the Council in implementing corporate approaches to health and safety as an integral part of the Authority's management systems.

### Visitors

The Council has a duty to visitors to safeguard them from harm whilst on the premises. All visitors are required to report to a designated reception point when they arrive on Council premises. Meeting organisers are required to brief visitors on emergency procedures, to inform them of any site hazards and any personal protective equipment required to be worn during their visit.

### Members of the Public/Customers

Due to the nature of the Council's business, members of the public may visit the Council's premises, and it has a duty to safeguard them from harm whilst doing so. The Council considers how its work activities could affect the health and safety of members of the public and customers by carrying out risk assessments and implementing effective risk control measures. Measures to safeguard members of the public and customers on Council premises must be included in operational and emergency procedures.

### Contractors

When engaging contractors, the relevant officer must be satisfied that they are competent in the tasks required and have sufficient resources to implement appropriate Health and Safety measures. Managers are required to adhere to the requirements of the Management of Contractors Policy. Contractors are required to report to someone on the premises who is responsible for ensuring that they are made aware of any hazards on site, by which they could be affected, and site emergency procedures. Contractors must inform the officer who is engaging them of any Health and Safety risks that they may introduce to the workplace, prior to commencement of work.

## **Emergency Procedures**

Emergency procedures are designed to give warning of imminent danger and to allow personnel to move to a place of safety. Each Corporate Director / Director is responsible for ensuring that all employees and visitors within their division are informed of and are fully conversant with emergency procedures. Relevant emergency procedures are stipulated in Council safety policies.

## **Reporting of Accidents, Incidents, Near Misses and Dangerous Occurrences**

It is the responsibility of all employees to ensure that all accidents, incidents, near misses and dangerous occurrences are reported to their manager. It is the responsibility of managers to report the accident or incident in line with the Council's accident reporting procedure.

## **First Aid**

The Council will maintain suitable numbers of trained first aid personnel and provide suitable first aid equipment to deal with minor accidents and emergencies in the workplace. Identities of first aiders are displayed throughout the workplace. Employees who regularly work away from their base are trained in emergency first aid skills and have access to a travelling first aid kit.

## **Risk Assessments**

Effective risk assessments are central to the Council's management of Health and Safety. Corporate Directors / Directors are required to ensure that they have a sufficient number of trained and competent employees to carry out risk assessments. These employees will be given the time and resources necessary to allow them to carry out this duty. The Health and Safety Officer actively monitors compliance with the Risk Assessment policy and will provide support, advice and guidance to managers and risk assessors, as appropriate.

## **Safety Audits**

Safety Audits will be conducted divisionally on a six-monthly basis and corporately on an annual basis, they will be carried out in accordance with the Council's Safety Audit policy. The Health and Safety Officer will actively monitor compliance with this policy.

## **Information, Instruction and Training**

All employees will receive information about the Council's Health and Safety arrangements and specific arrangements required to undertake their tasks. Information is disseminated through the following channels

- Induction
- Health and Safety Working Party
- Key messages from Management Team
- Divisional Meetings
- Departmental Meetings
- Health and Safety Briefings
- Notice Boards
- Intranet
- Email

All employees will receive basic Health and Safety training and are required to attend any health and safety training relevant to their role when assessed as appropriate. All managers will attend a safety management course e.g. IOSH managing safely and will attend refresher training as required. In addition, managers will receive specific Health and Safety training which has been assessed as necessary for their role.

## Occupational Health

An occupational health service is available, to which all employees will have access. The service will provide a pro-active approach to occupational health and will be a central point of advice for counselling, ill health issues which are affecting attendance or performance at work, and issues relating to a disability covered by the Equality Act 2010.

## 5. Policies

Health and Safety policies are crucial for ensuring adequate arrangements and information are in place for ensuring compliance with Health and Safety legislation.

Arrangements for approving and reviewing policies are as follows

1. Timetable for policies to be written and reviewed is produced by the Corporate Director (Resources) and the Human Resources Manager. HR should ensure that during the process of consultation, an audit trail is established to ensure that deadlines are met and to be able to account for who has read the policy and who has not.
2. When each policy is drafted it has a timetable for implementation agreed by the Corporate Director (Resources). The responsibility for ensuring this timetable is adhered to and resourced adequately lies with the Corporate Director (Resources).
3. Policies are approved through the Health and Safety Working Party, Principal Officers Group, Extended Management Team, Special Sub Group and Executive Board before implementation.
4. Policies are given a review date of a maximum of two years.
5. Policies that are corporately approved will have built into them accountability for ensuring the policy is implemented and that adequate resources are available to ensure that implementation and compliance are possible.

(Appendix 2 - Policy Approval and Implementation)

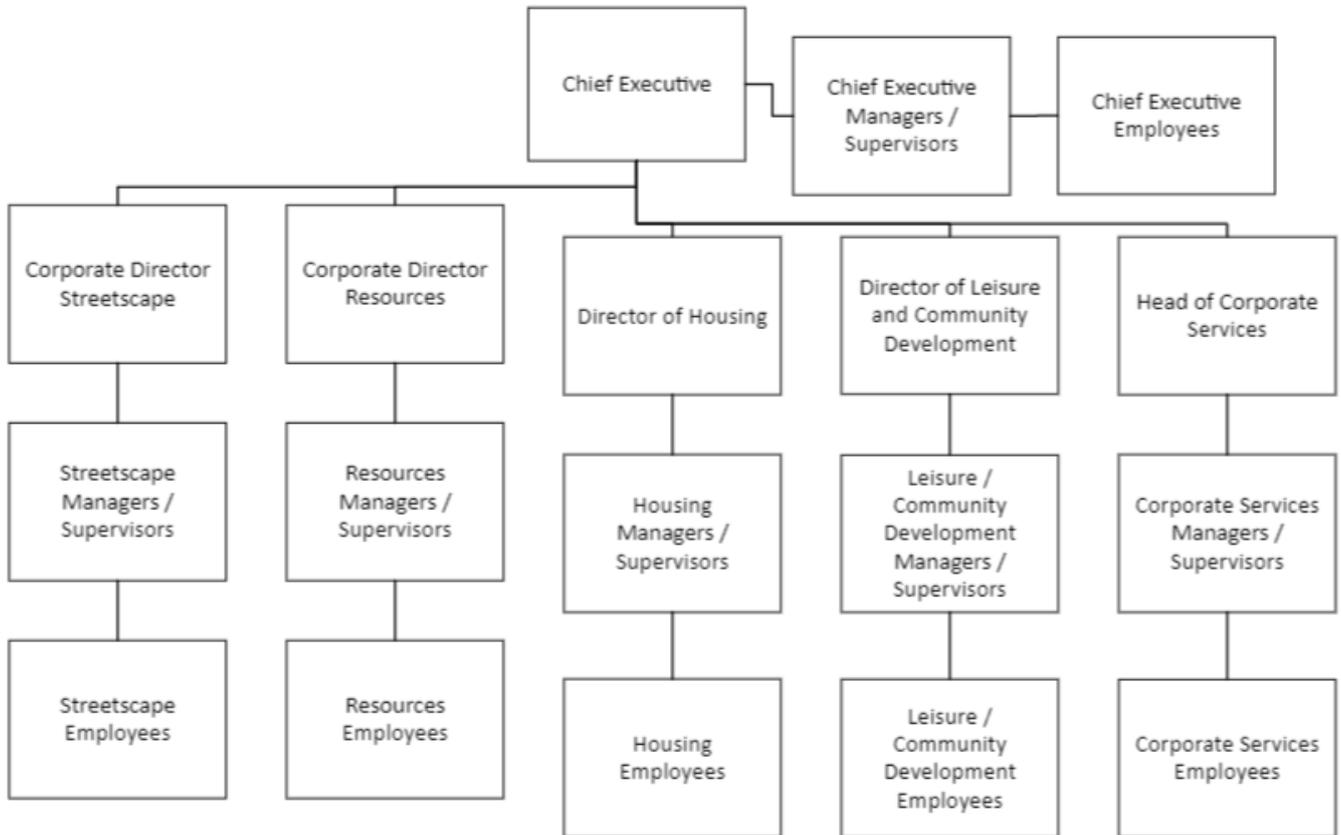
Policies that are corporately approved should be adhered to and a system for monitoring compliance has been set up by HR. **Non Compliance with Council policies, including arrangements for Health and Safety, will be investigated formally with disciplinary action taken where it is found failure to comply with Council policy was through a wilful act or negligence.**

Where Council policies are not being adhered to and there is an imminent threat to Health and Safety senior managers and/or the Health and Safety Officer should take immediate remedial action, including the cessation of work activities, as necessary.

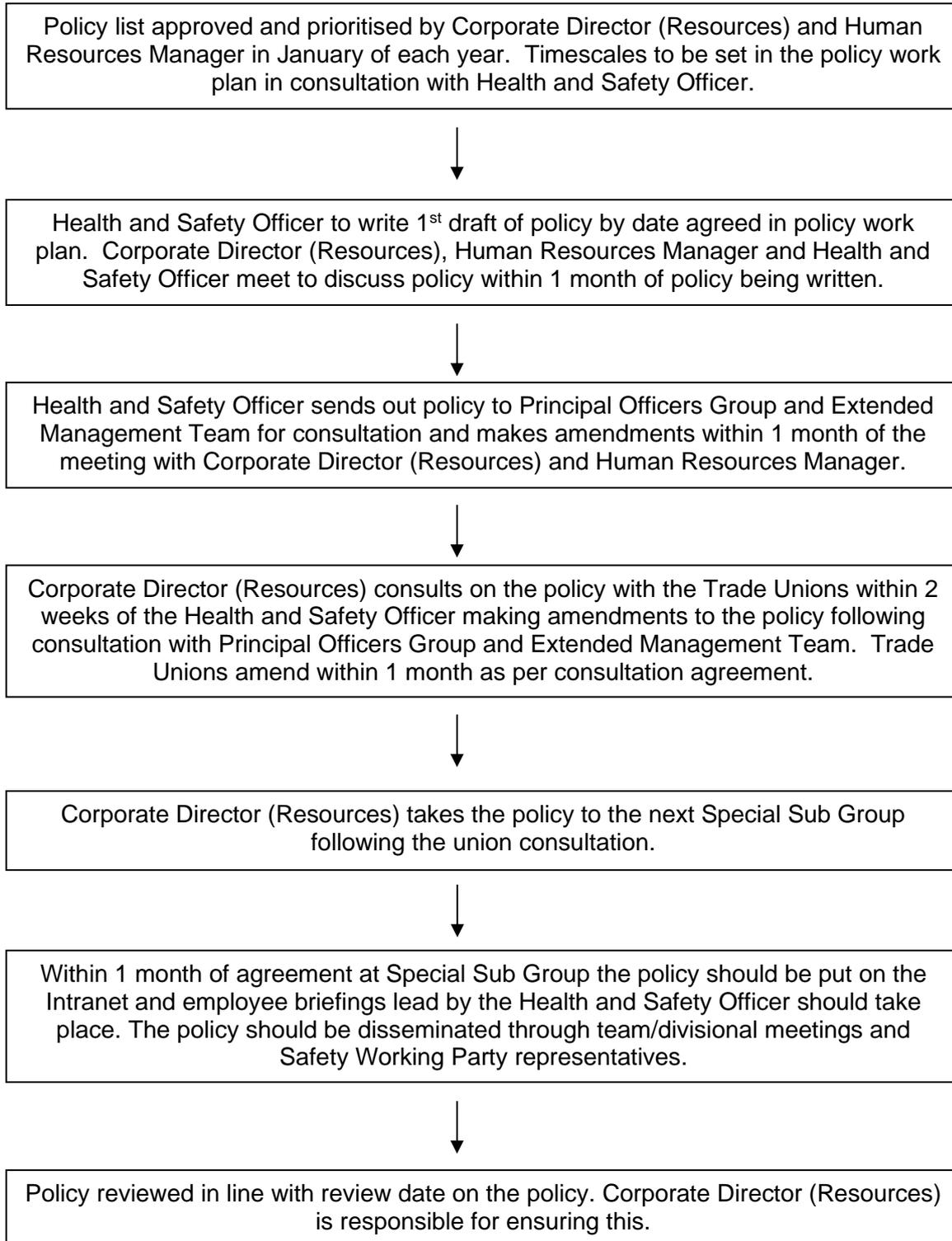
## Policy Revisions

Revision Date	Summary of changes
November 2023	Included Chief Executive foreword, updated statement and general safety arrangements

Health Safety and Welfare Organisational Chart



## Policy Approval and Implementation





**North Warwickshire  
Borough Council**

# **Water Management Policy**

**Guidance and Operational Procedure for the control of  
waterborne pathogens in hot and cold water systems**

**January 2024**

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# 1. Water Management Policy Statement

North Warwickshire Borough Council (NWBC) recognises that it has a duty under health and safety legislation and regulations to assess the potential of exposing employees, contractors, residents and the general public to potentially harmful waterborne bacteria. The water systems in premises owned, managed, rented or operated by NWBC are to be, as far as reasonably practicable, operated and maintained so as to control any such risk. NWBC aims to do all that is reasonably practicable to manage the risk of Legionellosis, E-coli, general water hygiene in hot water, cold water and drinking water.

It is the primary aim of this policy to ensure that NWBC complies with legislation and associated guidance. This will be achieved by ensuring a systematic approach to the identification, assessment, management and control of risks for each water system under the control of NWBC.

The management of the risk associated with waterborne pathogens is a continual commitment by NWBC involving regular management and progress meetings and commitment to a risk assessment program

NWBC will comply with its legal duties and take considered precautions to reduce the risks of exposure to waterborne pathogens, including:

- Identify and assess sources of risk. This includes checking whether conditions will encourage bacteria to multiply.
- If appropriate, prepare a written scheme for preventing or controlling the risk.
- Implement, manage and monitor appropriate control measures.
- Maintain records of risk assessments and control measures.
- Appoint competent persons (known as the 'Responsible Person') with sufficient authority, competence and knowledge of the installation to help take measures required to comply with legislation and, where possible, best practice.

All employees shall, in undertaking their work activities, comply with this Policy and perform their duties in accordance with any information, instruction and training received.

## 2. Waterborne Pathogens / Legionella

Legionnaire's disease is a potentially fatal form of pneumonia which can affect anybody, but which principally affects those who are susceptible because of age, illness, immunosuppression, smoking etc. It is caused by the bacterium *Legionella pneumophila* and related bacteria. Legionella bacteria can also cause less serious illnesses, which are not fatal, or permanently debilitating. The collective term used to cover the group of diseases caused by legionella bacteria is legionellosis.

Legionella bacteria are common and can be found naturally in environmental water sources such as rivers, lakes and reservoirs, usually in low numbers. Legionella bacteria can survive under a wide variety of environmental conditions and have been found in water at temperatures between 6 and 60°C. Water temperatures in the range 20 to 45°C seem to favour growth.

The organisms do not appear to multiply below 20°C and will not survive above 60°C. They may, however remain dormant in cold water and multiply only when water temperatures reach a suitable level. These temperatures may also influence virulence; legionella bacteria held at 37°C have greater virulence than the same legionella bacteria kept at a temperature below 25°C.

As legionella bacteria are commonly encountered in environmental sources they may eventually colonise manufactured water systems and can be found in hot and cold water systems and other plant which use or store water.

To reduce the possibility of creating conditions in which the risk from exposure to legionella bacteria is increased, it is important to control the risk by introducing measures which:

- *Restrict* proliferation of the organisms in the water system.
- *Reduce*, as far as is reasonably practicable, exposure to water droplets and aerosol.

Conditions which have been found to influence the colonisation and growth rate of Legionella include:

- Water temperature between 20-45 °C is the range which legionella bacteria will proliferate most rapidly, the most optimum temperature being 37 °C, legionella is killed within a few minutes at temperatures above 60 °C;
- Areas of poor water flow and areas within the water system which is either stagnant or becoming stagnant, water temperature may be likely to rise or fall to temperatures within the optimum range for proliferation and where the formation of biofilm is likely;
- The presence of biofilm is important in harbouring and providing favourable conditions in which legionella can grow, protecting from the effects of heat and biocides;
- Types of materials used in the system allow legionella bacteria to grow, and these should be avoided, examples of these include, galvanised steel, wood, rubber (often found in flexible hose reels), lead and rust.

- The presence of sediment, scale, sludge and organic matter, provides a nutrient source for legionella

There are a number of factors which increase the susceptibility of persons which contract Legionnaire's disease; these are:

- Sex, males are three times more likely to be infected than female;
- Existing respiratory disease that makes the lungs more vulnerable to infection;
- Illnesses and conditions such as cancer, diabetes, kidney disease or alcoholism;
- Smoking, due to the probability of impaired lung function;
- Patients on immunosuppressant drugs inhibiting the body's natural defence against infection;
- Increasing age, particularly above 50 years.

### **3. Policy Purpose and Scope**

NWBC is committed to reducing the risks associated with waterborne pathogens, namely Legionella and E-coli, by providing arrangements to ensure effective practice, training and auditing to ensure compliance. This policy document describes how NWBC will achieve this by:

- Setting out a clear framework to protect all employees, contractors, residents and the general public by minimisation of the risks associated with waterborne pathogens
- Enabling employees to understand their responsibilities in relation to this policy and associated written procedures documents, through awareness and training
- Identifying the correct practice for water hygiene risk minimisation and control for staff to implement based on relevant guidance and legislation
- Ensuring arrangements are in place to revise this document to reflect current legislation and guidance, and update should there be changes to current legislation and guidance

### **4. Management and Responsibilities**

All relevant persons should fully appreciate the actual and potential risks associated with water hygiene and concept of risk management. Although compliance with the guidance may be delegated to staff, or undertaken by contract, accountability cannot be delegated.

Those who are appointed to carry out the audit, control measures and other works associated with the Control of waterborne pathogens, should be suitably informed, instructed and trained and their suitability assessed. They should be properly trained to a standard, which ensures that tasks are carried out in a safe, technically competent

manner. Regular refresher training should be given and records of all initial and refresher training need to be maintained.

Persons designated to any staff functions below should possess sufficient skills, knowledge and experience to be able to perform the designated tasks safely. These skills may be defined as 'competence'.

Training will include:

- Training on the Principle of dealing with waterborne pathogens;
- Training on those specific systems and duties for which they are responsible;
- Refresher training on a regular basis to ensure all information and legislation relevant to waterborne pathogens is brought to their attention.

The Health & Safety Executive - Approved Code of Practice and guidance on regulations L8 (Fourth Edition) requires that one person should be appointed as being responsible for overseeing the assessment of risk associated with Legionella. NWBC delegates overall responsibility for ensuring compliance with statutory legislation to the Dutyholder.

### **Dutyholder**

The Chief Executive holds overall responsibility for health and safety matters for NWBC.

Under ACoP L8 4<sup>th</sup> Edition Para 33 the Dutyholder should carry out a risk assessment to identify the possible risks. This has been carried out with the assistance of a competent third party contractor. The purpose of the assessment is to enable a decision on:

- a) the risk to health, i.e. whether the potential for harm to health from exposure is reasonably foreseeable, unless adequate precautionary measures are taken;
- b) the necessary measures to prevent, or adequately control, the risk from exposure to legionella bacteria.

The Dutyholder devolves management responsibility of water systems to the Responsible Persons

### **Responsible Persons**

The Responsible Persons (ACoP L8 4<sup>th</sup> Edition Para 51) will ensure that all operational procedures are carried out in an effective and timely manner. The Responsible Persons have overall responsibility for the management of the control of Waterborne Pathogens within NWBC. The responsible persons will be required to establish suitable arrangements to maintain all records of testing, maintenance and risk assessments carried out. They shall be required to continually improve the policy and procedure documents, whenever possible, through monitoring of the implementation of the existing guidelines. The Responsible Person shall keep abreast of current statutory obligations.

NWBC identifies that the role of the Responsible Person will be to:

- Ensure that all operational procedures and maintenance instructions identified as parts of the waterborne pathogen risk management plan (written scheme) are suitable and sufficient, are regularly reviewed, are updated accordingly, are carried out in full and are recorded, and that responsibilities are identified and communicated to relevant members of staff.
- Ensure that the risk assessment procedure is suitable, up to date, that actions resulting from the risk assessment are implemented and that advice is given on potential areas of risk where systems do not adhere to this guidance.
- Ensure that a competent person or consultant or reputable Water Treatment Company is appointed to review the risk assessment regularly or when there is a change of use of the water system, poor control results or if cases of Legionnaires disease are associated with NWBC premises.
- To ensure that regulatory standards are met, that details of testing are maintained and that compliance to such standards is monitored
- To ensure that the Deputy Responsible Persons and all other staff involved in or associated with the management and control of waterborne pathogen risks, undertake regular training to ensure they keep updated in the management and control of water systems. The Responsible Persons will liaise with the HR department to ensure that training is carried out, and recorded, on a scheduled basis to ensure the competent staff can fulfil the performance of their specific duties.
- Review compliance with the Chief Executive as requested and communicate any changes in policy to other managers in the control process.
- Operate as the focal point for Legionella related issues, organizes appropriate training and co-ordinate NWBC's response in the event of a suspected case or outbreak of Legionnaires disease
- Manage the activities of service providers with respect to their contractual obligations.
- Ensure the necessary action is taken if Legionella bacteria (or other waterborne pathogens) are isolated such that risk is minimised and records kept of any remedial actions.

### **Deputy Responsible Persons**

Deputise for the Responsible Persons when they are not available and carry out duties as delegated by the Responsible Persons. A Deputy Responsible Person will be appointed to take responsibility for the management of the control of waterborne pathogens within a specified area of the Council. Sufficient Deputy Responsible Persons shall be appointed to ensure the whole Council is covered.

## **Competent Persons**

Those who are appointed to carry out the audit, risk assessments, control measures and other works associated with the control of Waterborne Pathogens, should be suitably informed, instructed and trained and their suitability assessed. They should be properly trained to a standard which ensures that tasks are carried out in a safe and technically competent manner.

Regular refresher training should be given and records of all initial and refresher training need to be maintained. Although training is an essential element of competence, it is not the only factor - it should be viewed as a product of sufficient training, experience, knowledge and other personal qualities which are needed to undertake a job safely. Competence is dependent on the needs of the situation and the nature of the risks involved. (ACoP L8 4<sup>th</sup> Edition Para 57 & 83).

## **Independent Water Hygiene Consultant**

The independent water hygiene consultant acts as the independent competent help and shall provide advice and assistance to NWBC and the staff associated with the control program

The Service Provider will be responsible for all aspects detailed in their scope of supply, for example the validation and verification of hot and cold water services and for conducting checks and tests. Service providers should ideally be accredited to the Legionella Control Association (LCA), be deemed competent and have training relevant to their position. The Service provider will comply with the 'Responsibilities of manufacturers, importer, suppliers and installers' section within L8 and report directly to the *Responsible Person*.

## **Responsibilities of Manufacturers, Importers, Suppliers and Installers**

Whoever designs, manufactures, imports or supplies water systems that may create a risk of exposure to waterborne pathogens have a responsibility to ensure, as far as reasonably practicable, that their water systems are so designed / constructed to ensure that it will be safe and without risk to health. They are also required to provide adequate information for the user to ensure that the water system will be safe and without risk to health. If such a system is identified as being a risk they shall inform the Responsible Person who will arrange for a risk assessment to be carried out on the equipment/system and provide a written scheme for dealing with the risk. This condition will be included in the control terms and conditions. (ACoP L8 4<sup>th</sup> Edition Para 75).

All contractors must comply with the Health and Safety Policy of NWBC.

All competent persons shall conduct all of their water system related tasks in accordance with:

- This policy document and the associated written procedures manual and planned preventative maintenance systems

Competent Persons should

- Only use [WRC](#) and [WRAS](#) approved materials when working on water systems
- Report defects regarding the design, condition, operation and performance of water systems what might increase the risk of waterborne pathogen proliferation
- Keep all relevant records
- Attend appropriate training and awareness training

NWBC employees have a responsibility to comply with this procedure and any other site specific procedures that are linked to it.

NWBC recognises its obligations in relation to non NWBC personnel, specifically contractors who work with mechanical plant.

NWBC also recognises its obligations towards all members of the visiting public in ensuring that all reasonably practicable steps will be taken to safeguard their health & safety whilst on NWBC premises.

### **Leased Premises**

Where there are water systems that are leased, NWBC will ensure that it provides the tenant or service provider information on their responsibilities regarding the water system under the lease/contract terms.

### **Further Documents**

Organisational responsibilities are displayed in the “Allocation of Responsibilities flowchart” (Appendix 1).

Contact arrangements for emergency call-out personnel are clearly detailed in “Lines of Communication – Responsibilities chart” (Appendix 2).

A list of contacts is Contact details for responsible officers, including external parties are available in “Key Contacts” (Appendix 3).

Management tasks and other tasks (e.g. hot and cold water tasks) are recorded in “Allocation of Specific responsibilities” (Appendix 4).

### **Training**

Staff allocated to a task must receive adequate training in respect of health & safety, hygiene and legionella control appropriate to the task they are responsible for conducting (Appendix 5).

## 5. Risk Assessments

A Competent Person under the direction of the Responsible Person shall carry out an audit to identify and assess the risk of exposure to waterborne pathogens from work activities and water systems on the premises.

The specialist contractor will complete this Risk Assessment in accordance with the Health & Safety Executive recommendations contained within the document '*Legionnaires' disease - The control of legionella bacteria in water systems - Approved code of practice & guidance on regulations, HSG 274 and BS 8580 Water quality - Risk assessments for Legionella control - Code of practice*'. These documents are widely recognised as containing the most comprehensive guidelines for safe management of risk systems and compliance is considered to be best-practice.

The specialist contractor appointed by NWBC will carry out a risk assessment programme to include changes to the estate such as new buildings, refurbishments and decommissioned buildings

The Responsible Person will ensure that a suitably qualified person carries out an adequate risk assessment. Where a risk assessment has identified a foreseeable risk, NWBC will firstly consider whether the risk can be eliminated or removed. This consideration should be documented.

Where elimination of the risk is not reasonably practicable, a written scheme for minimising the risk of exposure must be prepared. It is therefore important that such a scheme be suitably detailed to enable it to be implemented and managed effectively across NWBC.

The responsible person will also determine where the assessment will be kept and be responsible for scheduling corrective actions identified.

In carrying out the legionella risk assessment the general assessment of water hygiene will also be conducted, this will form the basis of a Risk Minimisation scheme which will also help to control bacteria in water systems.

The objectives of this survey are as follows:

To provide documented evidence as to the state of the water systems, control systems and management structure at the time of assessment.

To provide guidance and recommendations on how to control and minimise future risk of waterborne pathogen proliferation by taking into account the following:

- Potential for the formation of aerosols in water
- Potential for microbiological growth
- Systems which have a potential for temperature levels between 20°C and 45°C
- Measures that are proposed/in place to prevent the growth of waterborne pathogens. Should prevention not be 'reasonably practicable', then the

assessment should list the measures to be implemented that will minimise that risk.

The individual risk and susceptibility of the occupants of that particular room/building they are occupying. It may have a high risk due to the presence of susceptible people or it may have a high risk due to the density of population.

The record of the assessment is a living document that must be reviewed to ensure it remains up-to-date. Arrange to review the assessment regularly and specifically whenever there is reason to suspect it is no longer valid. An indication of when to review the assessment and what to consider should be recorded (ACoP L8 4<sup>th</sup> Edition Para 47).

This may result from, e.g.:

- a) changes to the water system or its use;
- b) changes to the use of the building in which the water system is installed;
- c) the availability of new information about risks or control measures;
- d) the results of checks indicating that control measures are no longer effective;
- e) changes to key personnel;
- f) a case of legionnaires' disease/legionellosis associated with the system.
- g) At a period no longer than two years

## **6. Schematic Drawings**

Schematic drawings should be prepared for water systems within NWBC sites.

A schematic diagram is an important tool to show the layout of the plant or system, including parts temporarily out of use and should be made available to inform the risk assessment process. These are not formal technical drawings and are intended to be easy to read without specialised training or experience. While providing only an indication of the size and scale, they allow someone unfamiliar with the layout of a system to understand the relative positions and connections of the relevant components quickly (ACoP L8 4<sup>th</sup> Edition Para 40; HSG 274 Part 2 Para 13 Info Box).

These drawings should identify:

- Piping routes
- Storage and header tanks
- Calorifiers and relevant items of plant
- Water softeners
- Filters
- Strainers
- Pumps
- Pressure / expansion vessels
- All water outlets
- Parts temporarily out of use

Such drawings should be readily available in each building and a system for updating the drawing should be implemented, ensuring alterations and drawings are reflected on the drawings.

## **7. System Management – Monitoring Control Scheme**

### **Mains and Storage Cold Water Services**

All cold water pipes should be lagged to prevent heat transfer from adjacent pipes. Dead legs and dead ends should be removed. Cold water tank/s should be checked annually to ensure that:

- Lids are present, in good condition and fit tightly
- Insect screens are fitted on the water overflow pipe
- Screened lid vent is fitted to allow ventilation of the stored water without ingress of vermin
- The thermal insulation on the tank and pipework is present and in good condition
- The water vessel does not show evidence of stagnation or biofilm
- The tank is clean and there is no sludge in the bottom of the tank
- The storage capacity allows for 12 hours per day.

Where remedial actions are required, a list of recommendations are to be submitted and an action plan to be implemented and completed under an agreed program of works and budget.

### **Disinfection of Water Storage Tanks**

The disinfection of water storage tank/s should be carried out when the annual condition monitoring of the tank is indicated as unacceptable which may signal an increase in bacterial colonisation.

During the annual condition monitoring check, tell-tale signs that suggest disinfection is required will include the presence of bio-film, stagnation, surface-scum, scale and other floating or submerged debris etc.

### **Temperature Monitoring**

Carry out temperature monitoring of the incoming and stored water. These readings should be carried out annually (ideally during summer) as a minimum and record less than 20°C. All readings should be recorded on the relevant water hygiene logbook. Inform Environmental Risk Officer if any readings are not within defined temperature range. Remedial action will be required if the water storage temperature is greater than 20°C. Remedial action may involve the application of additional insulation or reduction in storage capacity.

## **Cold Water Distribution System**

Monthly temperature checks will be taken at the sentinel outlets (nearest and furthest tap outlets from tank or mains) and recorded. These should be less than 20°C within 2 minutes. Take temperatures at a representative selection of other points to confirm they are below 20°C to create a temperature profile of the whole system over a defined time period (HSG 274 Part 2 Table 2.1).

## **Hot Water Distribution System**

Storage calorifier/s should be selected to meet normal daily fluctuations in hot water use without dropping below 60°C. Secondary returns should not fall below 50°C with all branches to individual hot taps to reach 50°C within 1 minute of the tap being turned on. All hot water distribution pipes should be insulated. All dead legs and dead ends should be removed.

### **Domestic & Commercial Hot Water Calorifiers**

Frequency of Maintenance - Calorifier/s should be subject to regular cleaning and maintenance procedures, which include the following:

Monthly - Check flow and return (if present) temperatures on DHW calorifier/s and record in the water hygiene logbook. Temperature of the calorifiers must be greater than 60°C and the secondary return greater than or equal to 50°C (HSG 274 Part 2 Table 2.1).

Whenever a calorifier is taken out of service it should be cleaned and disinfected as per BS PD855468 and the entire contents brought up to above a temperature of 60°C for at least one hour as per the procedure for the cleaning/chlorinating of calorifiers.

## **Hot Water Distribution System**

Monthly temperature checks will be taken at the sentinel outlets (nearest and furthest tap outlets from hot water source) to ensure that the temperature reaches greater than 50°C within one minute of running the water at full flow. 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 to create a temperature profile of the whole system over a defined time period (HSG 274 Part 2 Table 2.1).

### **Water Heaters (Less than 15 Litres)**

Hot water should be stored at 50-60°C and distributed above 50°C within 1 minute of running hot tap. If spray nozzles are fitted these should be cleaned and disinfected on a 3 monthly basis.

## **Instantaneous Water Heater**

These may be operated at a minimum temperature of 50°C provided they have been risk assessed, to confirm that there is regular turn over and there is no excessive pipe runs, as far as possible there should be no aerosol production from outlets fed from instantaneous water heaters, if spray nozzles are fitted these should be cleaned and disinfected on a 3 monthly basis.

## **Combination Water Heaters**

Check water temperatures at an outlet to confirm the heater operates at 55–60°C monthly. 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 take precautionary measures as determined by the findings of this monitoring regime.

## **Thermostatic Mixing Valves (TMV)**

Thermostatic mixing valves for wash hand basins, baths, taps and showers may be fitted in buildings where there are vulnerable users. For most people, the scalding risk is minimal where water is delivered up to 50°C at hand washbasins and using hot water signs may be considered sufficient, where a TMV is not fitted. However, where vulnerable people are identified and have access to baths or showers and the scalding risk is considered significant, TMV Type 3 (TMV3) are required. Further advice on safe bathing can be found in the UK Homecare Association (UKHCA) guidance Controlling scalding risks from bathing and showering.

Examples include:

- The elderly
- Those with mental health conditions or disabilities
- Those with sensory loss
- Young children

Thermostatic mixing valves should be fitted as close as possible to the point of use, thereby minimising the storage of blended water.

TMV's should not be fitted to areas where persons are not defined as vulnerable with regards scalding, risk assess whether the TMV fitting is required, and if not remove from system.

Inspect, clean, descale and disinfect any strainers or filters associated with TMV's to maintain protection against scald risk, TMVs require regular routine maintenance carried out by competent persons annually or in accordance with the manufacturer's instructions.

## **Shower Heads in Commercial Buildings**

Showers heads should be cleaned and disinfected on a quarterly basis (HSG 274 Part 2 Table 2.1). This action should be documented in the water hygiene logbook.

However, if it is determined that showers have not been used in a significant period of time, the risk of releasing unused water from the showers will be assessed. If it is deemed to be a risk the distribution system to the shower system should be fully and safely flushed according the correct method statement, before clean and disinfection of the shower heads takes place.

## Swimming Pool

### Maintenance and Water Testing

Further guidance on swimming pools may be obtained in the “HSG 179 - 2018 Health and Safety in Swimming Pools” an through the “Pool Water Treatment Advisory Group (PAWTAG)”. Swimming Pools should be maintained as per manufacturer’s and engineers instructions. These have been risk assessed as a separate system to the domestic hot and cold water system. On site there will be a separate control program (Normal Operating Plan or NOP) which lists servicing schedules, control measures and operating procedures. A digital log book detailing all water risk assessments and testing is maintained through an online platform.

### Microbiological Monitoring

The frequency and extent of the microbiological sampling strategy should be determined by the risk assessment but at least monthly for coliforms, E coli, P aeruginosa and legionella.

Sampling should be done when the spa pool is in use, preferably when heavily loaded or immediately afterwards, and sampling for legionella should be carried out in accordance with BS 7592 (Information box 6 Microbiological sampling procedure). The laboratory performing the tests should be accredited by the United Kingdom Accreditation Service (UKAS) to EN ISO 17025 General requirements for the competence of testing and calibration laboratories. Additional microbiological sampling should also be taken:

- when a pool is first used or recommissioned;
- after a report of ill health following spa-pool use;
- where there is doubt about the effectiveness of the control regime;
- where there has been a contamination incident;
- where alterations are made to the treatment or maintenance regimes.

The Responsible Person should cease operation of, and close the pool immediately where, following a routine microbiological test, there is evidence of gross contamination if there is:

- >10 cfu E coli per 100 ml in combination with >10 cfu P aeruginosa per 100 ml;
- >50 cfu P aeruginosa per 100 ml;
- >1000 cfu legionella spp per 100 ml;
- other chemical or physical evidence that the spa-pool disinfection system is not operating correctly.

If the microbiological results are unsatisfactory but do not indicate immediate closure as above, a review of the records should be carried out and the sampling and microbiological tests repeated immediately. Repeat failures could indicate significant microbiological contamination problems that may require more focused monitoring. Recommendations provided by competent persons should be followed these may include:

- backwash
- cleaning of pool and surrounds
- increased chlorination of pool water

### **Infrequently Used Outlets and Dead Legs**

Consideration should be given to removing dead legs and 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 weekly 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.

### **Dead Ends**

Dead end pipework should be removed from the water systems with all pipework cut back to the source.

### **POU Filters**

Record the service start date and lifespan or end date and replace filters as recommended by the manufacturer (0.2 µm 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).

All routine maintenance should be recorded in the water hygiene logbook.

### **Multi Use Filters**

Backwash and regenerate as specified by the manufacturer, according to manufacturer's guidelines.

All routine maintenance should be recorded in the water hygiene logbook.

### **Fire Suppression Systems**

The only firefighting emergency systems which will have an impact on the Water Management policy and procedures will be those systems which rely on a reservoir of

water storage, namely wet riser systems and hose reels. All hose reels shall be fitted to mains water supply unless a satisfactory WRAS approved double check valve is in place.

All routine maintenance should be recorded in the water hygiene logbook.

### **Safety Showers**

The use of safety, or deluge, showers is intended for such instances when an individual (staff) receives external contact with chemical contamination. Safety showers in the laboratories are of the overhead deluge type in use. The safety showers and eye wash stations shall be flushed at least every 6 months, where a tank is fitted, inspect monthly. Clean and disinfect shower heads, nozzles, roses, 'Y' strainers, and water storage tanks (where fitted).

All routine maintenance should be recorded in the water hygiene logbook.

### **Expansion Vessels**

Where practical, flush through and purge to drain monthly-six monthly, as indicated by the risk assessment.

All routine maintenance should be recorded in the water hygiene logbook.

### **Air Conditioning Units**

Air conditioning units should be serviced and maintained as per manufacturers guidelines, by ensuring unit has no leaks and cassette pumps is working correctly, usually quarterly - annual.

### **Fountains and Water Features**

Clean and disinfect ponds, spray heads and make-up tanks including all wetted surfaces, descaling as necessary, ideally quarterly or as indicated by the risk assessment, and depending on condition.

All routine maintenance should be recorded in the water hygiene logbook.

### **Cleaning and Disinfection**

Where necessary, hot and cold water services should be cleaned and, in the following situations, disinfected in accordance with *BS 855468: 2015 - Guide to the flushing and disinfection of services supplying water for domestic use within buildings and their curtilages*.

- a) on completion of a new water installation or refurbishment of a hot and cold water system;
- b) on installation of new components, especially those which have been pressure-tested using water by the manufacturer (see the manufacturer's instructions);

- c) where the hot and cold water is not used for a prolonged period and has not been hygiene-flushed as recommended, or the control measures have not been effective for a prolonged period (this could be as little as two or three weeks), depending on the ambient temperature, condition of the water system, potential for exposure to aerosols and the susceptibility of users considered in a site-specific risk assessment;
- d) on routine inspection of the water storage cisterns where there is evidence of significant contamination or stagnation;
- e) if the system or part of it has been substantially altered or accessed for maintenance purposes that might introduce contamination;
- f) following water sampling results that indicate evidence of microbial contamination of the water system;
- g) during or following an outbreak or suspected outbreak of legionellosis linked to the system; or
- h) where indicated by the site risk assessment.

### **Thermal Disinfection**

Thermal disinfection is only applicable to HWS and is commonly used as a rapid response. Thermal disinfection involves raising the HWS temperature to a level at which microorganisms are destroyed, drawing it through to every outlet, and then flushing at a slow flow rate to maintain the high temperature for a suitable period. It might be less effective than chemical disinfection and might not be practicable where the hot water supply is insufficient to maintain a high temperature throughout.

The temperature of the whole contents of the calorifier should be raised to ensure that the temperature at the HWS outlets does not fall below 65 °C and that water is circulated for at least 1 hour. Every hot water outlet throughout the system should then be flushed. Each tap and appliance should be run sequentially for at least 5 min at 65 °C (but not necessarily at full flow), and the process should be recorded.

Thermal disinfection might prove to be ineffective where parts of the calorifier or water system fail to reach the required temperature for a long enough period.

### **Chemical Disinfection**

The disinfection of a water system inside a building is normally based on chlorine being dosed at 50 mg/L (50 ppm) for a minimum contact period of one hour, at the end of which the concentration should be not less than 30 mg/L (30 ppm) (or 40% drop in concentration) free residual chlorine. For below-ground pipes, if the drop-in chlorine concentration is greater than 5 mg/L (assuming a 50mg/L dose is applied) for 1 h, at the end of this the concentration should be not less than 45 mg/L (45 ppm) (or 10% drop in concentration) free residual chlorine. However, lower concentrations and longer contact times are considered acceptable. Where the level of disinfectant concentrations need to be verified these should be checked using only the appropriate testing equipment.

Other disinfectants may be used where they are shown to be effective. Their intended application should take into account the type of system and user profile at the specified concentration levels and contact period.

## 8. Building Temporarily Taken Out Of Use (Mothballing)

Mothballing involves a building being taken out of use for a period greater than 30 days and managed to control microbiological (including Legionella) growth within the water systems. The objective is to prevent contamination and colonization of the water system with bacteria and biofilm. Considerations vary according to the length of time the building is out of use and the complexity of the building.

Simple systems, such as those in tenanted housing, individually occupied dwellings and small offices, can be left drained, e.g. for frost risk management purposes.

Mothballing large or complex properties entails more planning and should normally leave the systems filled, as they cannot easily be drained and drying of cistern joints, corrosion in metal pipework and biofilm formation can occur.

If the mothballing process is planned at the outset, a formal process can be put into place. Where the water system remains functional during mothballing a full flushing procedure and disinfection should be completed, and samples taken to prove the disinfection has been successful.

During drought it might not be possible to carry out extensive flushing work over a prolonged period to maintain a temperature control regime. It might be necessary to utilize a biocide in the system to prevent bacterial colonization during the unoccupied period.

All mothballing procedures are a compromise between allowing growth of bacteria in the system, use of water for flushing and potential degradation of the system from prolonged or higher concentrations of biocide use. Biocides should always be selected based on the best possible compromise. The higher biocide concentrations can result in the water no longer being classified as wholesome. If this is the case, water outlets should be clearly marked as unsafe for use and should always be flushed before reuse to leave the system fit for its intended purpose.

The following list of maintenance tasks should be carried out weekly as a minimum, if the system is not drained down.

- Run all hot and cold water taps on a weekly basis until the temperature at the outlet stabilises and is comparable to supply water or remove from the system completely if not in use or not required,
- Flush all WC's at least once.
- Ensure that urinals are flushing automatically.
- Log all flushing data with date, time, outlet location and name of operative performing works

## 9. Record Keeping & Audit

The Responsible Person(s) has delegated the task of record keeping; however, they can not delegate the responsibility of the need for accurate and up to date records. Records of all information relating to the operation and maintenance of water systems are maintained by the Deputy Responsible Person(s).

Records should include details about:

- the appointed Responsible Person(s) to conduct risk assessments, management of and implementation of the written scheme
- any significant findings from risk assessments
- the written scheme and its implementation
- the state of operation of the water system, i.e. in use/not in use
- the results of any monitoring inspection, test or check carried out including dates

These records should be retained throughout the period they are current and for at least two years afterwards. Retain records of any monitoring inspection, test or check carried out, and the dates, for at least five years.

To ensure that precautions continue to be applied and that adequate information is available, the Council will keep a record of the risk assessment, precautionary measures and treatments. All records should be signed, verified or authenticated by those people performing the various tasks assigned to them.

The following items should normally be recorded:

- names and positions of people responsible, and their deputies, for carrying out the various tasks under the written scheme
- a risk assessment, a written scheme of actions and control measures
- schematic diagrams of the water systems
- details of precautionary measures that have been applied/implemented with enough detail to show that they were applied/implemented correctly, and the dates on which they were carried out
- remedial work required, carried out and the date of completion
- a log detailing visits by contractors, consultants and other personnel
- cleaning and disinfection procedures, associated reports and certificates
- results of the chemical analysis of the water
- results of any biological monitoring
- information on other hazards, e.g. treatment chemicals
- cooling tower and evaporative condenser notification (if applicable)
- training records of personnel
- the name and position of the person or people who have responsibilities for implementing the written scheme, their respective responsibilities and their lines of communication
- records showing the current state of operation of the water system, e.g. when the system or plant is in use and, if not in use, whether it is drained down
- either the signature of the person carrying out the work, or other form of authentication where appropriate.

## Audits

Periodic audits of the control regime shall be conducted to confirm that the objectives are being achieved, and to review any changes in the control regime or systems which need to be made. The Responsible Person(s), the Deputy Responsible Person(s) and Health and Safety Officer will meet every six months to consider:

- Efficiency of the control regime
- Adequacy of available resources
- Risk assessments
- Remedial actions
- Water temperature monitoring
- The record system
- Training requirements
- New legislation

## **10. Action in the event of a Legionella Outbreak**

An outbreak is defined as two or more cases of Legionellosis where the onset of illness is closely linked in time (weeks rather than months) and where there is epidemiological evidence of a common source of infection, with or without microbiological evidence. It is the responsibility of the Proper Officer (The UK Health Security Agency) to declare an outbreak and an incident/outbreak control team should be convened to investigate outbreaks. The Proper Officer, appointed by the Local Authority, is usually a Consultant in Communicable Diseases Control (CCDC). If there are suspected cases of the disease, medical practitioners must notify the Proper Officer in the relevant local authority.

No employee of NWBC or a contractor working on the Councils behalf will make any comment to members of the press. All such requests are to be directed to the Duty Holder.

The Health & Safety Executive (HSE) may be involved in the investigation of outbreaks, their aim being to pursue compliance with health and safety legislation. As part of the outbreak investigation and control, the following requests and recommendations may be made by the enforcing authority:

- To shut down any process capable of generating and dispersing airborne water droplets
- To take water samples from the system before any emergency clean & chlorination takes place
- To co-operate fully in an investigation of any plant that may be suspected of being involved in the cause of the outbreak. This may involve, for example:
  - Tracing of all pipework runs
  - Detailed scrutiny of all operational records
  - Statements from plant operatives and managers
  - Statements from water treatment contractors or consultants
  - Inspection of Monitoring Records
  - Training Records
  - List of any Records for any Remedial works that have been carried out

- List of any Maintenance records for items of plant within the water systems

Final clearance from the outbreak investigation team may be required to restart the water system.

## 11. Legislation

The Health and Safety at Work etc Act 1974

The Management of Health and Safety at Work Regulations 1999

The Control of Substances Hazardous to Health Regulations 2002

The Approved Code of Practice, The Control of Legionella Bacteria in Water Systems (L8).

HSE document HSG274 Part 2 – The control of legionella bacteria in hot and cold water systems.

HSE document HSG274 Part 3 – The control of legionella bacteria in other risk systems.

BS 8580:2010 Water quality. Risk assessments for legionella control. Code of Practice.

BS 8558:2015 - Guide to the design, installation, testing and maintenance of services supplying water for domestic use within buildings and their curtilages.

BS 8554:2015 - Code of practice for the sampling and monitoring of hot and cold water services in buildings.

BS PD 855468:2015 - Guide to the flushing and disinfection of services supplying water for domestic use within buildings and their curtilages.

TM 13:2013 CIBSE Technical Memorandum - Minimising the Risk of Legionnaires Disease.

Water Management Society (WMSoc) Guidance Documents.

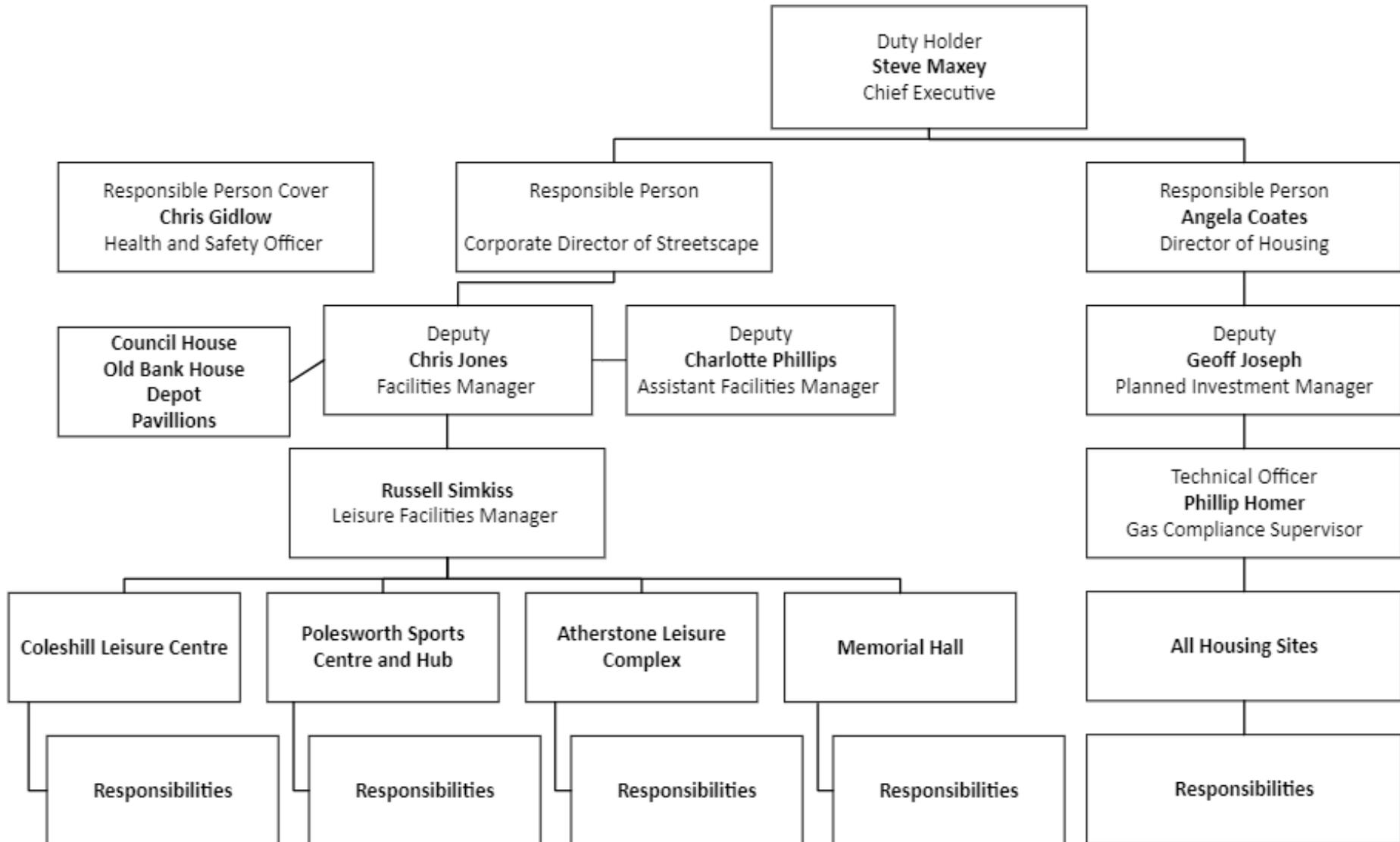
PAWTAG Code of Practice: The Management and Treatment of Swimming Pool Water

HSG 179 – Health and Safety in Swimming Pools

### Policy Revisions

Revision Date	Summary of changes

Appendix 1 – Allocations of Responsibilities – Flowchart



Appendix 2 – Lines of Communication – Responsibilities chart

<b>Task</b>	<b>Assigned To</b>	
Identification of the statutory 'Duty Holder'	Chief Executive – Steve Maxey	
The appointment of a Responsible Person(s) in writing	Corporate Buildings (Corporate Director of Streetscape)	Housing Angela Coates (Director of Housing)
The Appointment of Responsible Person(s) Cover in writing. This individual is to provide cover to named responsible Person(s) should they be unavailable for an extended duration.	Chris Gidlow (Health and Safety Officer)	
The appointment of a Deputy Responsible Person(s) in writing	Facilities Manager – Chris Jones  Assistant Facilities Manager – Charlotte Phillips	Planned Investment Manager – Geoff Joseph
Notification to the local authority of any 'Evaporative cooling devices'	Non On Any Site	
Arranging for a Legionellosis risk assessment	Responsible Person	
Provision of system schematics	Responsible Person	
Program for corrective actions identified by the risk assessment	Responsible Person	
Review of Legionellosis risk assessment	Responsible Person	
Production of the written scheme for prevention or control	Deputy Responsible Person	
Description of correct operation & precautions to be taken	Deputy Responsible Person	
Production of Method Statements for works carried out	Deputy Responsible Person	
Supply of COSHH & Risk assessments (including safety data sheets)	Deputy Responsible Person	
Provision of control parameters, measurement methods, sample locations, and frequencies.	Deputy Responsible Person	
Auditing control procedures	Responsible Person	
Provision of operating manuals	Responsible Person	
Ensure Emergency call out - emergency start-up and shut-down procedures are in place	Responsible Person	
Actions in the event of positive legionella results / outbreak	Duty Holder	
Ensuring that training is provided and competence identified	Duty Holder & Responsible Person	
Provision of a suitable record system	Responsible Person	
Maintaining the record system	Deputy Responsible Person	

Appendix 2 – Lines of Communication – Responsibilities chart

<b>FREQUENCY</b>	<b>TASK</b>	<b>Assigned To</b>
	<b>Domestic Systems</b>	
Weekly	Flushing of little used outlets & dead legs – to include all Hose Reels	NWBC Site Manager
Weekly	Standby plant switching	NWBC Site Manager
Monthly	Temperature monitoring	HBE
Quarterly	Shower head cleaning and disinfection	HBE
Quarterly	Routine microbiological sampling	HBE
As applicable	Mechanical PPM routines	NWBC Site Manager & Deputy Responsible Person
6 Monthly	Storage cistern temperature monitoring	HBE
6 Monthly	Service of TMVs in critical areas (where scalding risks are considered high)	NWBC Site Manager & Deputy Responsible Person
Annual	Softener service (and disinfection).	No Softener Equipment
Annual	Calorifier inspection, internal where access fitted. (Cleaning and disinfection as indicated by inspection).	HBE
Annual	Storage cistern inspections (Cleaning and disinfection as indicated by inspection).	HBE

\* Dependant on the systems on site and as recommended by the risk assessment or internal arrangements.

Appendix 3 – Key Contacts

Organisation	Named Responsible Person / Deputy / Site Manager		Telephone No.	Mobile No.	E-Mail Address
NWBC	Steve Maxey	Chief Executive	01827 719438	07970 747985	<a href="mailto:stevemaxey@northwarks.gov.uk">stevemaxey@northwarks.gov.uk</a>
NWBC		Corporate Director of Streetscape			
NWBC	Angela Coates	Director of Housing	01827 719369	07802 796317	<a href="mailto:angelacoates@northwarks.gov.uk">angelacoates@northwarks.gov.uk</a>
NWBC	Chris Gidlow	Health and Safety Officer	01827 719 236		<a href="mailto:chrisgidlow@northwarks.gov.uk">chrisgidlow@northwarks.gov.uk</a>
NWBC	Chris Jones	Facilities Manager	01827 719265	07970 248250	<a href="mailto:chrisjones@northwarks.gov.uk">chrisjones@northwarks.gov.uk</a>
	Charlotte Phillips	Facilities Management Officer	01827 719252	07976 508005	<a href="mailto:charlottephillips@northwarks.gov.uk">charlottephillips@northwarks.gov.uk</a>
NWBC	Geoff Joseph	Planned Investment Manager	01827 719281	07817 444456	<a href="mailto:GeoffJoseph@NorthWarks.gov.uk">GeoffJoseph@NorthWarks.gov.uk</a>
NWBC	Phillip Homer	Gas Compliance Supervisor	01827 719284	07970 248229	<a href="mailto:Philiphomer@NorthWarks.gov.uk">Philiphomer@NorthWarks.gov.uk</a>
NWBC	Russell Simkiss	Leisure Facilities Manager	01827 719257	07872 519517	<a href="mailto:russellsimkiss@northwarks.gov.uk">russellsimkiss@northwarks.gov.uk</a>

Appendix 4 – Allocation of Specific Responsibilities

<b>Responsibility</b>	<b>North Warwickshire Borough Council: Duty Holder</b>	Chief Executive	
	<b>North Warwickshire Borough Council: Responsible Persons</b>	<b>Corporate Buildings:</b> Corporate Director of Streetscape <b>Housing:</b> Director of Housing	
	<b>North Warwickshire Borough Council: Deputy Responsible Persons</b>	<b>Corporate Buildings:</b> Facilities Manager Assistant Facilities Manager <b>Housing:</b> Planned Investment Manager	
	<b>North Warwickshire Borough Council: Site Managers</b>	<b>Corporate Buildings:</b> Facilities Manager <ul style="list-style-type: none"> <li>• The Council House</li> <li>• Old Bank House</li> <li>• The Depot</li> <li>• Sports Pavilions</li> </ul> Leisure Facilities Manager <ul style="list-style-type: none"> <li>• Atherstone Leisure Complex</li> <li>• Memorial Hall</li> <li>• Coleshill Leisure Centre</li> <li>• Polesworth Sports Centre and Hub</li> </ul> <b>Housing:</b> Gas Compliance Supervisor <ul style="list-style-type: none"> <li>• All Housing Sites</li> </ul>	
	<b>Healthy Built Environment Ltd.</b>	<b>HBE</b>	
<b>MANAGEMENT TASKS</b>			
<b>Type of Water System</b>	<b>Service / Task</b>	<b>Frequency</b>	
All	Identification of statutory Duty Holder, responsible person and deputies	Continuous	<b>Chief Executive: Duty Holder</b>
	Notification to the local authority of any 'Evaporative cooling devices'	1 off	<b>None on Site</b>
	Conducting of a Legionellosis risk assessment	1 off	<b>Responsible Persons</b>
	Provisions of system schematics	1 off	<b>Responsible Persons</b>
	Remedial or corrective actions required with priority / degree of risk	1 off	<b>Responsible Persons</b>
	Programme for corrective action to be undertaken	1 off	<b>Responsible Persons</b>
	Review of Legionellosis risk assessment	In accordance with risk assessment recommendation or if system is	<b>Responsible Persons</b>

Appendix 4 – Allocation of Specific Responsibilities

		altered	
	Production of the written scheme for prevention or control	1 off	<b>Deputy Responsible Persons</b>
	Method Statements, COSHH, Risk assessments & Safety data sheets for works carried out	As required	<b>Deputy Responsible Persons</b>
	Provision of control parameters, measurement methods, sample locations, and frequencies.	Continuous	<b>Deputy Responsible Persons</b>
	Emergency start-up and shut-down procedures.	1 off	<b>Responsible Persons</b>
	Description of normal and safe operation	1 off	<b>Deputy Responsible Persons</b>
	Action in the event of positive legionella results / outbreak	1 off	<b>Chief Executive: Duty Holder</b>
	Ensuring that training is provided and competence identified	Continuous	<b>Chief Executive: Duty Holder</b>
	Provision of a suitable record system (Logbook)	1 of	<b>Responsible Persons</b>
	Auditing & Maintaining the record system	Continuous	<b>Deputy Responsible Persons &amp; NWBC Internal Audit</b>
<b>OPTIONAL SERVICES</b>	Chemical Monitoring & dosing of closed systems	Quarterly	<b>Deputy Responsible Persons &amp; Site Managers</b>
	TVC and Coliform sampling of domestic systems	Refurbished / New Build	<b>Deputy Responsible Persons &amp; Site Managers</b>
	Legionella sampling of domestic systems	Refurbished / New Build	<b>Deputy Responsible Persons &amp; Site Managers</b>

**HOT & COLD WATER TASKS**

<b>Type of Water System</b>	<b>Service / Task</b>	<b>Frequency</b>	
Hot water services	Arrange for samples to be taken from hot water calorifiers, in order to note condition of drain water	<b>Annually</b>	<b>HBE</b>
	Visual check on internal surfaces of calorifiers for scale and sludge.	<b>Annually</b>	<b>HBE</b>
	Check representative taps for temperature as above on a rotational basis	<b>To cover all locations in a year</b>	<b>HBE</b>
	Check temperature in flow and return calorifiers	<b>Monthly</b>	<b>HBE</b>
	Check water temperature up to one minute to see if it has reached 50°C in the *sentinel taps	<b>Monthly</b>	<b>HBE</b>
Cold water services	Visually inspect cold water storage tanks and report remedial work where necessary	<b>Annually</b>	<b>HBE</b>
	Check representative taps for temperature on a rotational basis	<b>To cover all locations in a year.</b>	<b>HBE</b>
	Check tank water temperature remote from ball valve and mains temperature at ball valve	<b>Six monthly</b>	<b>HBE</b>
	Note maximum temperatures recorded by fixed max / min thermometer where fitted	<b>Six monthly</b>	<b>HBE</b>
	Check that temperature is below 20°C after running the water for up to two minutes in the *sentinel taps	<b>Monthly</b>	<b>HBE</b>
Shower heads	Dismantle, clean and descale shower heads and hoses.	<b>Quarterly or as necessary by inspection</b>	<b>HBE</b>
Little used outlets	Flush through and purge to drain, or purge to drain immediately before use, without release of aerosols	<b>Weekly</b>	<b>Deputy Responsible Persons &amp; Site Managers</b>

**OTHER SYSTEMS TASKS**

<b>Type of Water System</b>	<b>Service / Task</b>	<b>Frequency</b>	
Water softeners	Clean and disinfect resin and brine tank – check with manufacturers what chemicals can be used to disinfect the resin bed	As recommended by manufacturer	<b>Deputy Responsible Persons &amp; Site Managers</b>
Emergency showers and eye-wash sprays	Flush through and purge to drain	Six monthly or more frequently if recommended by manufacturers	<b>Deputy Responsible Persons &amp; Site Managers</b>
Sprinkler and hose reel systems	When witnessing tests of sprinkler blow-down and hose reels, ensure that there is minimum risk of exposure to aerosols.	As directed	<b>Deputy Responsible Persons &amp; Site Managers</b>
Lathe and machine tool coolant systems	Clean and disinfect storage and distribution system.	Six-monthly	<b>Deputy Responsible Persons &amp; Site Managers</b>

**\* Tasks will be dependent on what is reflected in the site specific plans, as the types of systems will vary between sites.**

Any staff allocated to a task need to have received adequate training in respect of health and safety, hygiene and legionella control appropriate to the task(s) they are responsible for conducting.

### **Responsible Person**

The training should provide information on the legal obligations of the Responsible Person with guidance on how to achieve practical systematic risk management to satisfy the HSE L8 Approved Code of Practice. The training should deal with the legal and management aspects of managing the risk and include:

- Legionella awareness
- Simple microbiology, biofilms and bacterial growth.
- Legislation and Regulation
- Record Keeping
- Systematic risk management including risk audits and risk assessments
- Managing a water treatment program and contract
- Interpretation and reporting results
- Conducting a review

### **Deputy Responsible Person / Staff with responsibilities for Legionella Control**

The training should provide information on the risks posed by Legionnaires' disease and the operational/technical measures for controlling and minimising such risks. The training should deal with the operational aspects of preventing the risk and include:

- Legionella awareness
- Simple microbiology, biofilms and bacterial growth.
- Legislation and Regulation
- Record Keeping
- Design, operation, monitoring and maintenance of water systems
- Managing a water treatment program and contract
- Interpretation and reporting results
- Conducting a review

### **Cleaning & Disinfecting Staff**

The training should provide information on the risks posed by legionnaires' disease and the practical measures for controlling and minimising such risks. The training should deal with the practical aspects of preventing the risk and include

- Legionella awareness
- Simple microbiology, biofilms and bacterial growth.
- Legislation and Regulation
- Record Keeping
- Cleaning and disinfection techniques / safety

Staff competence is assessed regularly during manager / staff development meetings - additional training requirements will be recorded in the individual's training records.

Where services are to be conducted by a contractor (specialist service provider), on behalf of NWBC, the Contractor shall provide sufficient information to allow NWBC to assess the competency of the contractor and individual personnel carrying out the tasks. This shall include

## Appendix 5 – Training and Competence

the names of persons who may carry out surveys, monitoring and produce assessments together with their relevant qualifications and experience. NWBC will look for an up to date certificate indicating the Contractor is a member of the Legionella Control Association (LCA) or suitable other quality control system.



# North Warwickshire Borough Council

## **Fire Safety Policy**

January 2024

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## **Fire Policy Statement**

North Warwickshire Borough Council (NWBC) treats fire safety with the utmost importance, as far as is reasonably practicable, all steps will be taken by the Council to prevent or minimise the possibility of fire within Council premises. NWBC and its employees endeavour to comply with The Regulatory Reform (Fire Safety) Order 2005 at all times.

NWBC will, at all times, strive to ensure the safety and wellbeing of all persons who make use of its facilities, including those in the vicinity of council premises. This includes residents, visitors, staff and contractors.

The Council acknowledges that despite best efforts, it cannot be assumed that fire will never break out. Should a fire break out, sufficient and properly maintained systems are in place to warn, guide and protect staff during an emergency.

## Responsible Person

NWBC Chief Executive is the named responsible person for policy and management of fire safety, as per The Regulatory Reform (Fire Safety) Order 2005. The Chief Executive has delegated the following roles:

### Facilities Manager

- Daily fire exit checks
- Firefighting equipment checks and servicing
- Daily fire alarm panel check
- Weekly fire alarm test and annual servicing
- Emergency light tests and servicing
- 3 yearly, or upon significant alteration, completion of fire risk assessment. Fire risk assessments reviewed annually
- Annual portable appliance testing (PAT)
- 5 yearly EICR (fixed installation wire tests, 20% annually)
- Annual fire evacuation drill
- Management of fire marshal safety checks

### Human Resources Manager

- Staff receive induction fire awareness training
- Corporate fire marshal training, including refreshers

### Health and Safety Officer

- Management and development of the Council's Fire Policy and Fire Evacuation Procedures

## All Staff

All NWBC staff have a personal responsibility for their safety and the safety of those around them. Staff should report any potentially dangerous issues to the Facilities Manager and the Health and Safety Officer.

Staff are not to carry out any actions which may put their own or other safety at risk. If such actions are identified, responsible staff may be subject to the NWBC disciplinary policy.

## **Fire Strategy**

NWBC's fire strategy is focussed upon

- Early alerting of all persons
- Preventing risks to health
- Prompt egress, to a place of safety
- Requesting support from professional services (fire brigade)

The type, number and level of fire safety measures has been decided by a fire risk assessment, carried out by a competent person.

All NWBC employees will receive fire awareness training. Additionally, volunteer and responsible staff will receive Fire Marshal training. Fire Marshals have additional responsibility to ensure that the building is clear and to assist the Incident Control Team as required.

Fire Marshals receive training in the use of fire fighting equipment, however NWBC prioritises sounding of alarms and early evacuation over attempting to fight a fire. NWBC fire policy prioritises the life and safety of people above property protection.

## **Fire Risk Assessment**

NWBC Facilities Manager will employ a competent person to assist with their duties under Section 9 Risk Assessment of the Regulatory Reform (Fire Safety) Order 2005.

The fire risk assessment will be completed for Council premises on an annual basis or sooner, if there is a significant change to the building, procedure or policy.

Actions identified by a fire risk assessment must be considered and acted upon appropriately, in good time, by the Facilities Manager.

# Testing and Maintenance

## Fire Alarm and Detection

- Weekly tests are carried out by the Facilities Management team
- Annual fire alarm services are carried out by third party contractor
- Annual servicing of smoke and heat detectors is carried out by third party contractor
- Annual servicing of the server room gas suppression system (INERGEN) is carried out by third party contractor

## Emergency Lighting

- 11 annual emergency light checks are carried out by third party contractor
- 1 annual emergency light drain down test is carried out by third party contractor

## Portable Electrical Equipment

- Annual portable appliance testing of all appliances is carried out by third party contractor

## Portable Fire Fighting Equipment

- Annual services are carried out by third party contractor
- Monthly checks are carried out by the Facilities Management team

## Means of Escape

- Fire doors are checked as part of fire risk assessments carried out every 3 years by a competent third party contractor and reviewed annually
- Magnetic release checks are carried out by Facilities Management weekly
- 6 monthly magnetic release servicing is carried out by a third party contractor

## Records of Testing and Maintenance

- All documents are stored digitally by the Facilities Management team
- On site documents are displayed locally where required

## Staff Training

All employees complete an induction process upon employment. The first day of employment includes:

- Action to take upon discovering a fire or hearing the alarm
- Location of exits
- Location of assembly points

All employees sign to agree knowledge and understanding of induction, this information is stored centrally in the employee's HR record.

Fire awareness training will also be provided to all employees.

When highlighted, staff will receive additional training in the form of a Fire Marshal course, this provides additional knowledge regarding fire fighting equipment and knowledge of fire safety measures. Fire Marshal training is refreshed on a 3 yearly basis.

Additional training identified corporately, or departmentally, is provided to employees as required.

## Evacuation Drills

Evacuation drills will take place annually. Alterations to procedures may necessitate more frequent practice to establish new protocols; this will be at the discretion of the Chief Executive, Facilities Manager and Health and Safety Officer.

Staff identified with a Personal Emergency Evacuation Plan (PEEP) will be informed of drills in advance.

## Policy on Firefighting

Employees who have been trained in the use of portable firefighting equipment may attempt to fight an uncontrolled fire. They must feel confident to undertake this task and evacuation procedures must have been instigated before firefighting attempts are made.

Life and the safety of people is always the number one priority, they must not attempt to fight a fire if they feel it puts them or others in danger.

Sufficient fire fighting equipment is provided on site, extinguishers are located by exits as a means to clear an exit in emergency for safe egress. Before tackling fires, consider alternative routes of escape.

## Personal Emergency Evacuation Plans (PEEP)

The Health and Safety at Work Act 1974, Management of Health & Safety at Work Regulations 1999 and the Equality Act 2010 require employers to implement effective arrangements for emergency evacuation for all employees and those under the employers duty of care. This requires that all building users can safely escape the building in case of an emergency, including those with temporary or permanent impairments which can affect mobility or the ability to react to conventional emergency systems.

The underlying question in deciding whether a PEEP is necessary is:

**“Can the individual evacuate the building unaided, in a prompt manner during an emergency situation?”**

If the answer is, “No”, then it is likely that a PEEP will be required.

Employees, Councillors, Tenants/Partners and Visitors requiring a PEEP have the responsibility to inform the Council of their requirements for assistance in an evacuation. The Council is responsible for ensuring any persons within their area who require assistance to evacuate the building, in an emergency, have a PEEP. The Council will assist with the design and implementation of a PEEP.

A blank template for creating a PEEP can be provided by the Health and Safety Officer, upon request. Facilities Management and the Health and Safety Officer will be involved in the development of all PEEPs, with support from Human Resources if required. The PEEP will likely include information regarding lines of escape, support to be provided and any additional alterations required to aide the individual in notification and escape.

PEEP's will be reviewed annually, upon changes to the building or procedures and if the individual's circumstances alter.

## Contractors on Site

Contractors invited to Council sites to carry out authorised works must provide Facilities Management with their risk assessments and method statements (RAMS). RAMS must include a section on fire safety.

Contractors carrying out “hot works” (works using open flames or heat producing equipment, reaching temperatures which can cause ignition to flammable materials) must produce RAMS specific for these works. In the case of hot works, contractors must provide suitable fire fighting equipment and additional precautions, e.g., fire watches, these will be presented through the RAMS.

Facilities Management are entitled to inspect any equipment brought on site, checking for service dates, PAT tests and that it is in safe working order. On site management can stop any contractor working on their premises, when they feel there is a level of unacceptable risk to the contractors, employees and/or visitors.

## Relevant Legislation

Regulatory Reform (Fire Safety) Order 2005

Health and Safety at Work Act 1974

Management of Health & Safety at Work Regulations 1999

Equality Act 2010

**Policy Written**

**November 2023**

### Policy Revisions

Revision Date	Summary of changes

## Appendix 1

### Example of - Fire Action Notice

'Fire Action' and 'Your Fire Assembly Point Is' notices are displayed throughout the building, notably on fire escape routes.

Ensuring the notices are displayed and the fire assembly points are displayed on the notices is co-ordinated by Facilities Management.

#### Example of the 'Fire Action' notice:

#### Fire Action

##### ! On discovering a fire you must:

- Raise the alarm immediately by breaking the glass in the nearest call point.
- Extinguish the fire using equipment provided, if possible and safe to do so.
- Call the Fire and Rescue Service, Landline - (9)999 or Mobile - 999.
- Evacuate the building by the shortest, safest route.
- Report to your designate Assembly Point and advise the Incident Controller of the location and details of the fire.
- Report to your designated Assembly Point.
- Remain at the assembly point until authorised to leave.

##### ! On hearing the fire alarm you must:

- Evacuate the building by the shortest, safest route. (Escort your visitors to the designated Assembly Point).
- Report to your designated Assembly Point.
- Remain at the assembly point until authorised to leave.

#### Remember:

! Close all doors where possible but do not delay the evacuation.

! Your safety is our first concern.



DO NOT take risks.



DO NOT stop to collect personal belongings.



DO NOT re-enter the building for any reason until authorised to do so.

## Appendix 2

### Example of - Fire Marshal Responsibilities

Fire safety and prevention training will provide Fire Marshals and their deputies with the necessary skills for performing their responsibilities and tasks.

This responsibility includes:

- Attending Fire Marshal training and refresher training, as required,
- Promoting fire awareness and fire prevention within designated zone,
- Remain observant to potential fire safety hazards, rectifying where possible and/or reporting to Facilities Management,
- Ensuring deputies are aware when you will not be available to carry out your duties. Examples include annual leave, when on a course, at a meeting, lunch etc.

#### Additional Duties to the Fire Action Notice:

- Collect roll call list and put on fire marshal tabard (if safe to do so)
- Sweep attributed area, ensuring all rooms are cleared when leaving
- Report to the Incident Control Team
- Fire Marshals who have cleared areas offer support to Incident Control Team
- Perform any duties requested by Incident Control Team, as appropriate
- Attend post evacuation debrief session

## Appendix 3

# Example of - Duties of All Employees and Partners Employees

All members of staff and tenants/partners members of staff have a responsibility for fire safety within the Council.

This responsibility includes:

- Ensuring that members of your team know your whereabouts during the day,
- Ensuring that your visitors have been signed in/out at reception every time they enter and exit the building,
- Ensuring that your visitors are aware of;  
the procedure in the event of 'Discovering a fire',  
the procedure in the event of 'On hearing the fire alarm',  
the location of the fire assembly point,
- Ensuring that you escort your visitors to the fire assembly point in the event of a fire evacuation,
- Ensuring that any Contractors working for you on the premises are aware of;  
what the fire alarm sounds like,  
the 'Fire Action' notices - what they must do and  
their fire assembly point.
- Ensuring that if you are working out of hours or during weekends that you sign in/out of the 'out of hours' log every time you enter/exit the building.
- Ensuring that you are aware of any PEEPs for visitors and contractors and implement them when necessary,
- Comply with requests from Fire Marshals that arise from the monthly fire safety inspections,
- Adhering to fire prevention rules and procedures,
- Attending Fire Awareness courses when requested,
- Report any fire safety issues from the weekly tests or fire drills to the Fire Marshal i.e. Can't hear the fire alarm, roll call list not up to date etc,
- Reporting any health and safety issues to your line manager or the Health and Safety Officer.

## Appendix 4

### Example of - Duties of All Councillors

All Councillors have a responsibility for fire safety within the Council.

This responsibility includes:

- Recording every time you enter and exit the building using the fire evacuation log by the rear door,
- Ensuring that your visitors have been signed into the fire evacuation log every time they enter and exit the building,
- Ensuring that your visitors are aware of;  
the procedure in the event of 'Discovering a fire',  
the procedure in the event of 'On hearing the fire alarm',  
the location of the fire assembly point,
- Ensuring that you escort your visitors to the fire assembly point in the event of a fire evacuation,
- Ensuring that you are aware of the generic PEEPs for visitors and implement them when necessary,
- Promoting fire awareness and fire prevention within the Civic Suite zone,
- Read out the fire evacuation procedure at the start of all meetings,
- Ensuring that a copy of this fire evacuation procedure is kept available in all group rooms at all times.

### Example of - Duties of the Chair Person or Trainer of any Meeting/Training

Before any meeting or training commences the chair person or trainer must ensure that they read out to everyone the statement below.

#### **Read This Statement Out At The Beginning of All Meetings / Training**

There is a location plan of the exits and the assembly points situated on the doors of this room, please familiarise yourself with it.

**All visitors report to your assigned assembly point.**

#### **Fire Action**

##### **! On discovering a fire you must:**

- Raise the alarm immediately by breaking the glass in the nearest call point.
- Extinguish the fire using equipment provided, if possible and safe to do so.
- Call the Fire and Rescue Service, Landline - (9)999 or Mobile - 999.
- Evacuate the building by the shortest, safest route.
- Report to your designated assembly point and advise the Incident Controller of the location and details of the fire.
- Report to your designated Assembly Point for roll call.
- Remain at the assembly point until authorised to leave.

##### **! On hearing the fire alarm you must:**

- Evacuate the building by the shortest, safest route. (Escort your visitors to your designated Assembly Point).
- Report to your designated Assembly Point for roll call.
- Remain at the assembly point until authorised to leave.

#### **Remember:**

**!** Close all doors where possible but do not delay the evacuation.

**!** Your safety is our first concern.



**DO NOT** take risks.



**DO NOT** stop to collect personal belongings.



**DO NOT** re-enter the building for any reason until authorised to do so.

**Agenda Item No 6**

**Special Sub-Group**

**9 January 2024**

**Report of the  
Chief Executive**

**Exclusion of the Public and Press**

**Recommendation to the Board**

**To consider, in accordance with Section 100A(4) of the Local Government Act 1972, whether it is in the public interest that the public and press be excluded from the meeting for the following item of business, on the grounds that it involves the likely disclosure of exempt information as defined by Schedule 12A to the Act.**

**Agenda Item No 7**

**Staffing Matter** – Report of the Chief Executive

Paragraph 1 – Information relating to an individual.

In relation to the item listed above members should only exclude the public if the public interest in doing so outweighs the public interest in disclosing the information, giving their reasons as to why that is the case.

The Contact Officer for this report is Amanda Tonks (719221).