



Ref: FOIA Reference 2019/20-063

Royal Stoke University Hospital
Quality, Safety and Compliance Department
Newcastle Road
Stoke-on-Trent
Staffordshire
ST4 6QG

Date: 28th May 2019

Email foi@uhn.nhs.uk

Dear

I am writing in response to your email dated 30th April 2019 requesting information under the Freedom of Information Act (2000) regarding Legionella Control

As of 1st November 2014 University Hospitals of North Midlands NHS Trust (UHNM) manages two hospital sites – Royal Stoke University Hospital, and County Hospital (Stafford). Therefore the response below is for the two sites combined from that date where appropriate.

Q1 Do you comply with the laws in L8 (ACOP) 4th edition, guidance in HSG274, the health & safety at work act 1974?

I am emailing to ensure you are currently complying with the above guidance documents and health and safety laws.

It would be much appreciated if you could feedback your current monitoring regime (if instated) also a copy of your legionella risk assessment,

Alternatively could you provide confirmation of having a legionella risk assessment onsite with the date this was last carried out as it is a L8 (ACOP) legal requirement?

(Risk Assessment Include:

- **Nominated Authorities**
- **Current Scheme of Control Evaluation**
- **Asset Register**
- **Temperature Monitoring of Sentinel Outlets**
- **Schematic Diagram of the System (Microsoft Visio)**
- **Cold Water Storage Tanks and Calorifier/Combination Storage Water Heater Surveys**
- **Photographic Evidence of Internal Condition of Cold Water Storage Tanks & Water System Assets**
- **Dead End & Dead Leg / Infrequently Used Outlets Survey**
- **Expansion Vessel Survey**
- **Thermostatic Mixing Valve Survey & Identification of Scald Risks**
- **Other Risk Systems Survey**
- **Full Summary of Remedial Action Identified**
- **Risk Rating with Matrix Explained)**

A1 At the RSUH we have twenty four (24) Risk assessments, one for each building. They are in paper format at present, and they were completed in June 2018.

At the County Hospital we have seven (7) Risk Assessments completed and issued March 2018, this covers the entire County Hospital site.

All the above is included in the legionella Risk assessments including risk rated action plan/ list of remedial actions/work plan.

As a detailed statement of compliance:

UHNM has a full set of recent Legionella risk assessment completed by an independent LCA approved specialist. These were completed in summer 2018. A work plan and action plan is included in each risk assessment and this is used to manage remedial works and sign off. In 2018 the Trust appointed Hydrop to review our Water safety plan to align the three elements of the site and identify gaps. This is still in draft format but GAP analysis work was completed and there were no major issues identified. The Trust has used Hydrop as the appointed Authorising engineer for the past 3-4 years. During this time, Hydrop have completed quarterly compliance audits/ reviews and these are discussed at the Water Safety group (WSG). The water safety group is multi-disciplinary, is chaired by the Deputy Director of Infection Prevention (DIPC) and meets on a quarterly basis. It uses an agreed agenda and Terms of Reference (TOR).

Key WSG members have received full RP training and have been formally appointed via the authorising engineer. Legionella CP training is completed by key members of the estates craft team and Legionella awareness training is completed by the remainder of the Estates team and specific staff from the clinical teams.

Tasks are completed by competent persons and evidence of task completion is collected centrally in the Estates workshops in Legionella log books. Estates use an electronic FM system to manage Asset lists; maintenance profiles (SOPS) and monitor performance on a monthly basis. There is a separate defect logging system that feeds into the log books once defects are remediated.

Microbiological sample collection is completed in house by staff nominated as competent persons following formal training provided by Hydrop. Processing of Water samples is completed by a local UKAS accredited laboratory with agreed collection and delivery protocol. A formal positive notification process is in place following any positive samples.

*Please note that any individuals identified do not give consent for their personal data to be processed for the purposes of direct marketing.

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<http://www.nationalarchives.gov.uk/doc/open-government-licence/version/3/>. Where information was created by third parties, you should contact them directly for permission to re-use the information.

An anonymised copy of this request can be found on the Trust's disclosure log, please note that all requests can be found at the following link: <http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx>

This letter confirms the completion of this request. A log of this request and a copy of this letter will be held by the Trust.

If you have any queries related to the response provided please in the first instance contact my office.

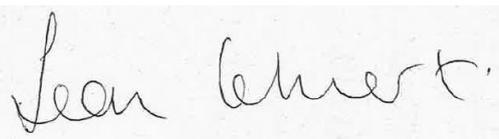
Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and request an assessment of the manner in which the Trust has managed your request.

The Information Commissioner may be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via www.ico.org.uk.

If following review of the responses I can be of any further assistance please contact my secretary on 01782 676474.

Yours,



Jean Lehnert
Information Governance Manager