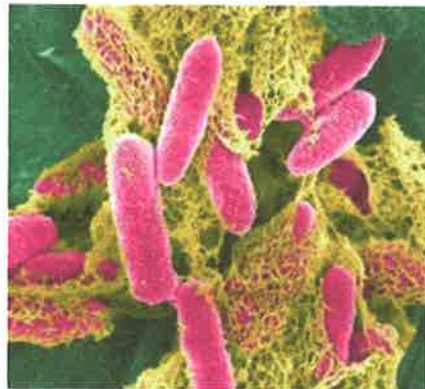




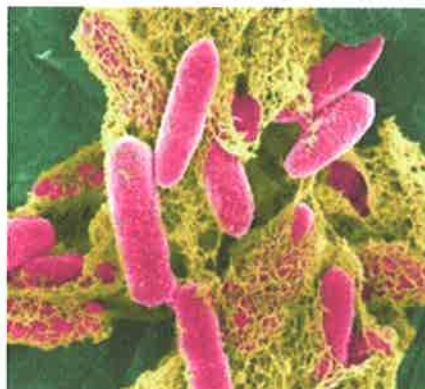
Legionellosis Risk Management Status
Audit of SLM Managed Sites
for Cotswold District Council Legal
And Property Services
September 2014



Date : September 2014
Next Audit Due: September 2015
Issued To : Ivan Hackett
Author : Alan Hambidge



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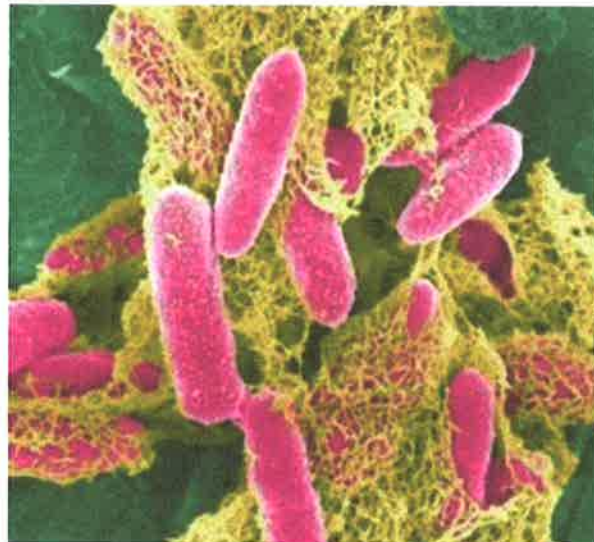
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Legionellosis Risk Management Audit

Section A



1 LEGIONELLOSIS MANAGEMENT AUDIT OF SLM MANAGED SITES - SUMMARY / RECOMMENDATIONS

The audit of the Legionellosis risk management approach of the SLM managed sites (leisure centres, museum) for the Legal and Property Services Department for Cotswold District Council was completed in September 2014 by Alan Hambidge, a LCA accredited, Chartered Safety and Health Practitioner and Managing Director of Empathy Environmental Consultants Ltd. The responses provided are based on answers given by members of staff of SLM during the site visits and the review of records, reports policy and other data that was presented in the log-books during the on-site audit visits, and thus can only be based on the data provided at that time.

The audit involved on-site interview and records review, and a new simple formal audit questionnaire was completed.

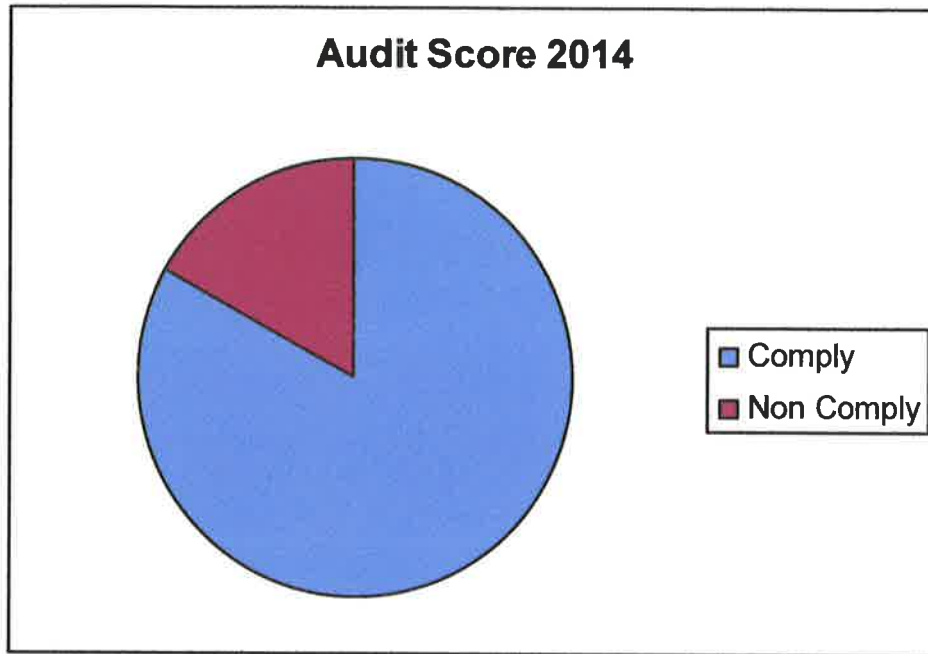
The principle observations and recommendations from the audit were:

- 1) Adequate legionellosis risk assessments are complete and up-to-date. These are completed by Kingfisher Environmental Services Ltd;
- 2) Ensure that an adequate legionellosis policy and procedures is in place;
- 3) The legionellosis training for Responsible Persons and Deputies is complete and up-to-date;
- 4) Generally the monitoring regimes at the sites appear to be appropriate and in accordance with L8, and records are present. There are however some gaps, and non conformances were not always clearly identified by the consultants to site staff members. SLM staff all stated that communication from Kingfisher Environmental Services Ltd was not always clear. Ensure these are continued and records have a clear audit trail (see point 10 below also);
- 5) Shower heads are cleaned and de-scaled appropriately;
- 6) Some sections of the log-books were blank (see detailed sheets);
- 7) Formally appoint Deputy RPs where identified;
- 8) No training certificates on file at Bourton Leisure Centre – obtain, or update training as appropriate;
- 9) There is a written scheme in the log-book. The old L8 plan is present. Update to scheme (apparently on-going);

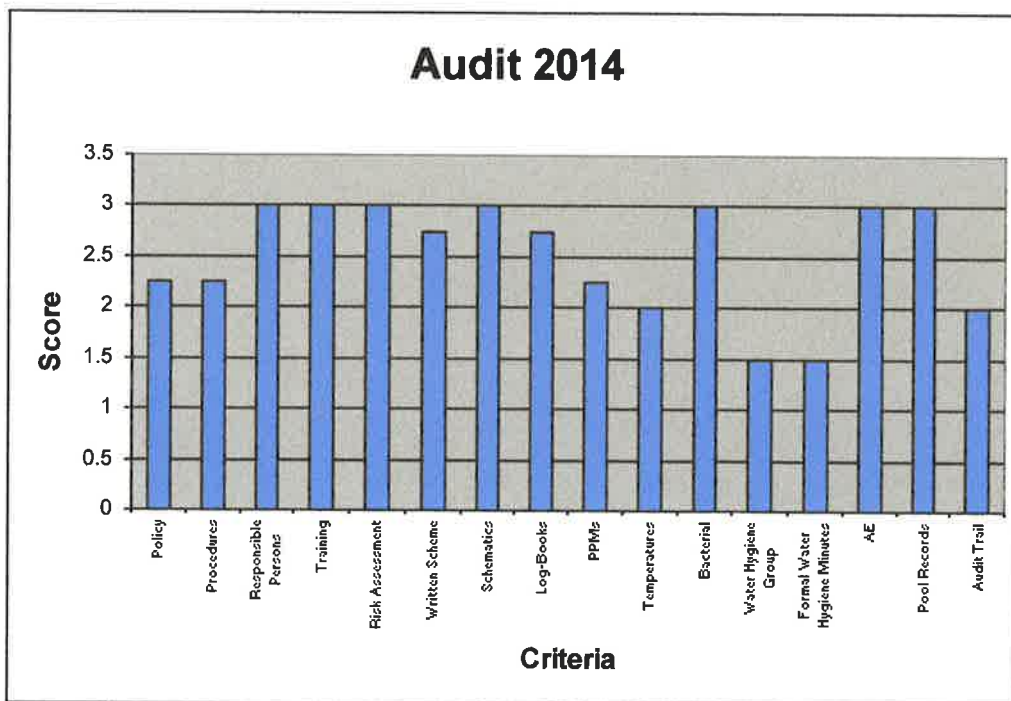
- 10) There is a good structure to the existing log-books, but there are a few gaps. However, the following was observed at some sites: File section 5 should contain "Annual Programme" this is missing. File section 6 "Records of site actions" was a blank sheet with no clear actions. Sections 7, 8, 10, 12, 13 and 14 were also either empty or contained blank forms. File section 14 should contain "Designated Responsibilities" this was absent. File section 8 "external contractors visits" was blank. File section 12 "Safety Data Sheets" was blank. Complete the missing sections of the log-book. Particularly important are sections 5 and 14 as these would clearly specify responsibilities and also set an action plan. Develop a clear action plan and also a brief report to summarise status on a monthly basis.
- 11) A monthly assurance report to show PPMs completed %, and PPMs compliant is recommended.
- 12) There are several issues over the recording of these. Staff commented that data is recorded by Kingfisher who complete the service, but that they are not always told of non conformances. It is not clear if non conformances are checked. It appears that sentinels are not checked in the same areas consistently. Confirm sentinels. Confirm action plan and programme. Develop assurance reports and ensure SLM staff are aware of actions required.
- 13) There is not currently a water hygiene group. Establish a quarterly water hygiene group.
- 14) Complete a scalding audit;

2014 audit scores

The pie-chart below shows that an average score of 83/100 for the 2014 audit:



The graph below shows the spread of scores by criteria:



2 AUDIT METHOD

The audit of the Legionellosis risk management approach of SLM managed sites for Cotswold District Council was based on the requirements of numerous key legionellosis / water hygiene management legislation, most notably:

- COSHH Regulations;
- L8;
- HSG 274;
- BS8580.

Reference is also made to the Management of Health and Safety at Work Regulations (MHSWR) in determining if an item is "Suitable and Sufficient" for its purpose.

A single simple audit questionnaire has been applied based on the HSE model audit. Answers were gathered by interview and record review. Responses were on a strict compliance basis ("Yes" or "No").

Responses were the assigned a score out of 3, thus:

- 3 = All records or actions are complete, suitable and up-to-date;
- 2 = Partial complete, or just out-of-date;
- 1 = Very incomplete, or very out-of-date;
- 0 = Absent;

Where deemed appropriate by the auditor, incremental scores of 0.25 are assigned (so for example scores of 1.75 or 2.25 are possible where appropriate).

3 SLM MANAGED AUDIT ACTION PLAN -

The following table provides a summary of the principle recommendations:

No:	Recommendation:	Priority:	Deadline:	Achieved: (Yes / No)
1	Adequate legionellosis risk assessments are complete and up-to-date. These are completed by Kingfisher Environmental Services Ltd;	TBC	Yes on-going	Yes on-going
2	Ensure that an adequate legionellosis policy and procedures is in place;	TBC	TBC	
3	The legionellosis training for Responsible Persons and Deputies is complete and up-to-date. Provide where absent at Bourton LC;	TBC	TBC	
4	Generally the monitoring regimes at the sites appear to be appropriate and in accordance with L8, and records are present. There are however some gaps, and non conformances were not always clearly identified by the consultants to site staff members. SLM staff all stated that communication from Kingfisher Environmental Services Ltd was not always clear. Ensure these are continued and records have a clear audit trail (see point 10 below also)	TBC	TBC	
5	Shower heads are cleaned and de-scaled appropriately;	TBC	TBC	
6	Some sections of the log-books were blank (see detailed sheets);	TBC	TBC	
7	Formally appoint Deputy RPs where identified;	TBC	TBC	
8	No training certificates on file at Bourton Leisure Centre – obtain, or update training as appropriate;	TBC	TBC	
9	There is a written scheme in the log-book. The old L8 plan is present. Update to scheme (apparently on-going);	TBC	TBC	
10	There is a good structure to the existing log-books, but there are a few gaps. However, the following was observed at some sites: File section 5 should contain "Annual Programme" this is missing. File section 6 "Records of site actions" was a blank sheet with no clear actions. Sections 7, 8, 10, 12, 13 and 14 were also either empty or contained blank forms. File section 14 should contain "Designated Responsibilities" this was absent. File section 8 "external contractors visits" was blank. File section 12 "Safety Data Sheets" was blank. Complete the missing sections of the log-book. Particularly important are sections 5 and 14 as these would clearly specify responsibilities and also set an action plan. Develop a clear action plan and also a brief report to summarise status on a monthly basis.	TBC	TBC	
11	A monthly assurance report to show PPMs completed %, and PPMs compliant is recommended.	TBC	TBC	
12	There is not currently a water hygiene group. Establish a quarterly water hygiene group.	TBC	TBC	
13	Complete a scalding audit;	TBC	TBC	

Legionellosis Risk Management Audit

Section B



4 COMPLETED AUDIT FORM -

The following table provides a summary of the principle audit findings by site. Recommendations are shown in bold red/brown text.

No:	Criteria:	Response and Recommended Action by Site :					
		A: Cotswold Leisure Centre, Cirencester		B: Corinium Museum, Cirencester		C: Cotswold Leisure Centre, Bourton-on-the-Water	
		Response & Recommendation:	Score:	Response & Recommendation:	Score:	Response & Recommendation:	Score:
1	Policy	Apparently Yes – in SLM H&S Manual, but not seen and status TBC. Forward to Cotswold DC.	2.25	Apparently Yes – in SLM H&S Manual, but not seen and status TBC. Forward to Cotswold DC.	2.25	Apparently Yes – in SLM H&S Manual, but not seen and status TBC. Forward to Cotswold DC.	2.25
2	Procedures	Apparently Yes – in SLM H&S Manual, but not seen and status TBC. Forward to Cotswold DC.	2.25	Apparently Yes – in SLM H&S Manual, but not seen and status TBC. Forward to Cotswold DC.	2.25	Apparently Yes – in SLM H&S Manual, but not seen and status TBC. Forward to Cotswold DC.	2.25
3	Responsible Persons	Yes in place. RP = Andrea North. Deputy RP = Paul Gowan.	3	Yes in place. RP = Amanda Hart. Deputy RP = Not Appointed. Appoint a Deputy.	3	Yes in place. RP = Jo Whitfield. Deputy RP = Not Appointed. Appoint a Deputy.	3
4	Training	Yes in place. Completed by Marc Grimshaw of Kingfisher Environmental Services Ltd on 25/09/13. Five staff training certificates are on the file.	3	Yes in place. Completed by Marc Grimshaw of Kingfisher Environmental Services Ltd on 25/09/13.	3	There were no training certificates in file section 13 of the log-book. It is believed that the training is completed. Obtain the certificates or complete if appropriate.	1
5	Risk Assessment	Yes. Completed by Brian Henry of Kingfisher Environmental Services Ltd. Survey completed 20/07/13. Report issued 20/08/13.	3	Yes. Completed by Kingfisher Environmental Services Ltd. Survey completed 29/07/13. Report issued 20/08/13.	3	The risk assessment was absent from the log-book file, but was found loose on-site. Alan Hambidge inserted into the correct part of the log-book. Risk assessment was again completed by Kingfisher Environmental Services Ltd on 30/07/14.	3
6	Written Scheme	There is a written scheme in the log-book. The old L8 plan is present. Update to scheme (apparently on-going).	2.75	There is a written scheme in the log-book. The old L8 plan is present. Update to scheme (apparently on-going).	2.75	There is a written scheme in the log-book. The old L8 plan is present. Update to scheme (apparently on-going).	2.75
7	Schematics	Basic schematics are present in the log-book. These were completed by Kingfisher Environmental Services Ltd in July 2014.	3	Basic schematics are present in the log-book. These were completed by Kingfisher Environmental Services Ltd in July 2014.	3	The schematics were absent from the log-book file, but were found loose on-site. Alan Hambidge inserted into the correct part of the log-book. These were completed by Kingfisher Environmental Services Ltd in July 2014.	3

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		Response & Recommendation:	Response & Recommendation:	Response & Recommendation:
8	Log-Books	<p>Yes – there is a good structure, but there are a few gaps. File section 5 should contain "Annual Programme" this is missing. File section 14 should contain "Designated Responsibilities" this was absent. File section 8 "external contractors visits" was blank. File section 12 "Safety Data Sheets" was blank. Complete the missing sections of the log-book. Particularly important are sections 5 and 14 as these would clearly specify responsibilities and also set an action plan. Develop a clear action plan and also a brief report to summarise status on a monthly basis.</p>	<p>Yes – there is a good structure, but there are a few gaps. File section 5 should contain "Annual Programme" this is missing. File section 14 should contain "Designated Responsibilities" this was absent. File section 8 "external contractors visits" was blank. Section 9 "Water Quality Analysis" was blank. Section 10 "Cleaning and Disinfection Certificates" was blank. File section 12 "Safety Data Sheets" was blank. Complete the missing sections of the log-book. Particularly important are sections 5 and 14 as these would clearly specify responsibilities and also set an action plan. Develop a clear action plan and also a brief report to summarise status on a monthly basis.</p>	<p>Yes – there is a good structure, but there are a few gaps. Risk assessments and schematics were absent, but found whilst on-site and put into file sections 3 and 4. File section 5 should contain "Annual Programme" this is missing. File section 6 "Records of site actions" was a blank sheet with no clear actions. Sections 7, 8, 10, 12, 13 and 14 were also either empty or contained blank forms. File section 14 should contain "Designated Responsibilities" this was absent. File section 8 "external contractors visits" was blank. File section 12 "Safety Data Sheets" was blank. Complete the missing sections of the log-book. Particularly important are sections 5 and 14 as these would clearly specify responsibilities and also set an action plan. Develop a clear action plan and also a brief report to summarise status on a monthly basis.</p>
9	PPMs	<p>See note and recommendations above. A monthly assurance report to show PPMs completed %, and PPMs compliant is recommended.</p>	<p>See note and recommendations above. A monthly assurance report to show PPMs completed %, and PPMs compliant is recommended.</p>	<p>See note and recommendations above. A monthly assurance report to show PPMs completed %, and PPMs compliant is recommended.</p>

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		Response & Recommendation:	Score:	Response & Recommendation:	Score:	Response & Recommendation:	Score:
10	Temperatures	There are several issues over the recording of these. Staff commented that data is recorded by Kingfisher who complete the service, but that they are not always told of non conformances. It is not clear if non conformances are checked. It appears that sentinels are not checked in the same areas consistently. Confirm sentinels. Confirm action plan and programme. Develop assurance reports and ensure SLM staff are aware of actions required.	2	There are several issues over the recording of these. Staff commented that data is recorded by Kingfisher who complete the service, but that they are not always told of non conformances. It is not clear if non conformances are checked. It appears that sentinels are not checked in the same areas consistently. Confirm sentinels. Confirm action plan and programme. Develop assurance reports and ensure SLM staff are aware of actions required.	2	There are several issues over the recording of these. Staff commented that data is recorded by Kingfisher who complete the service, but that they are not always told of non conformances. It is not clear if non conformances are checked. It appears that sentinels are not checked in the same areas consistently. Confirm sentinels. Confirm action plan and programme. Develop assurance reports and ensure SLM staff are aware of actions required.	2
11	Bacterial	See graphs appended – results are good.	3	See graphs appended – results are good.	3	See graphs appended – results are good.	3
12	Water Hygiene Group	There is not currently a water hygiene group. Establish a quarterly water hygiene group.	1.5	There is not currently a water hygiene group. Establish a quarterly water hygiene group.	1.5	There is not currently a water hygiene group. Establish a quarterly water hygiene group.	1.5
13	Formal Water Hygiene Minutes	No - There is not currently a water hygiene group. Establish a quarterly water hygiene group.	1.5	No - There is not currently a water hygiene group. Establish a quarterly water hygiene group.	1.5	No - There is not currently a water hygiene group. Establish a quarterly water hygiene group.	1.5
14	AE	Kingfisher Environmental Services Ltd provide independent specialist advice, risk assessments, sampling etc. Yes – and results are OK.	3	Kingfisher Environmental Services Ltd provide independent specialist advice, risk assessments, sampling etc. No Pool = NA	3	Kingfisher Environmental Services Ltd provide independent specialist advice, risk assessments, sampling etc. Yes – and results are OK.	3
15	Pool Records	Are some issues and gaps as stated above.	2	Are some issues and gaps as stated above.	2	Are some issues and gaps as stated above.	2
16	Audit Trail						

CDC SLM Audit 2014

Policy	2.25
Procedures	2.25
Responsible Persons	3
Training	3
Risk Assessment	3
Written Scheme	2.75
Schematics	3
Log-Books	2.75
PPMs	2.25
Temperatures	2
Bacterial	3
Water Hygiene Group	1.5
Formal Water Hygiene Minutes	1.5
AE	3
Pool Records	3
Audit Trail	2

Score:

Comply	83
Non Comply	17

