

WATER FLUSHING SOP

| Issue Date | Review Date | Version |
|-------------|-------------|---------|
| August 2019 | August 2024 | 2.2 |

Purpose

This procedure identifies the process through which the Trust gains assurance that it is responding appropriately to the recommendations and requirements for the correct process for Water Flushing within the Trust, for the prevention of Legionella.

Who should read this document?

All staff groups

Key Messages

The Trust needs to be assured that there are reliable procedures in place for the safe operation of water flushing to prevent the proliferation of Legionella.

Flush low use water outlets every 48hours for 5 minutes

Augmented care areas for water controls are required to flush all outlets daily for 5 minutes

All high risk sinks and clinical wash hand basins will be fitted with separate hot/cold taps or mixer taps – ensure flushing of both hot and cold water services separately

All Derriford based wards and clinical departments are required to complete the electronic submission weekly to confirm compliance with the flushing procedure or that it is not applicable for the area (Appendix 1)

Offsite clinical areas are required to return the paper document to Estates weekly (Appendix 2)

Only Site Services Department are responsible for providing approval for water contractors to undertake work on the Water system

If you are in any doubt about water safety please call the Site Services Helpdesk on **ext. 31300**

There are specific roles and responsibilities for Estates, Site Services, Matrons of the specific areas, Ward Sisters, Clinical and Non-Clinical Managers, and Infection Prevention and Control Team.

Any clinical area closed to its usual use will require the flushing regime to be maintained. The responsibility for this will be determined by reasons for which the area is closed.

| Core accountabilities | |
|--|---|
| Owner | Dr Stuart Windsor, Director of Estates and Facilities |
| Review | Infection Control Committee |
| Ratification | Nick Thomas, Executive Director of Planning and Site Services Lenny Byrne, Chief Nurse |
| Dissemination (Raising Awareness) | Infection Control Committee |
| Compliance | Heath Technical Memorandum 04-01: The Control of Legionella |

Links to other policies and procedures

Health and Safety Policy
 Risk Management Framework
 Preventing Slips Trips and Falls SOP
 Infection Prevention and Control Policy
 Water Management Policy

Version History

| | | |
|------------|----------------|--|
| 1.0 | October 2013 | Document Issued |
| 2.0 | February 2014 | Update - Infection Control Committee |
| 2.1 | September 2017 | Update - Estates |
| 2.2 | August 2019 | Update ratified at the Infection Control Committee |

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents. Larger text, Braille and Audio versions can be made available upon request.

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Standard Operating Procedure (SOP)

Water Flushing

1 Introduction

This procedure recognises that the framework for managing and monitoring the correct procedure for Water Flushing within the Trust and its provision, and use needs to accommodate Trust-wide needs. This is not limited to a specific area. This procedure also recognises that the Trust needs to be assured that the outcomes of inappropriate flushing are responded to appropriately and escalated where necessary.

This sets out how the Trust will ensure safety in all of its water flushing activities and compliance with its legal and statutory obligations.

Estates Engineering Staff are to be fully conversant with the contents of the Water Flushing SOP. For the wider Trust staff group, please note the following policy headlines:

All wards and Clinical Departments are required to assess the frequency of use of all water outlets and risk assess the on-going need for low use outlets, and flush all low use outlets every 48 hours for 5 minutes.

All wards and Clinical Departments will receive a weekly electronic notification for completion with compliance of the flush regime for low use outlets or to report not applicable.

Clinical areas deemed as augmented care areas for water controls are required to undertake the flush regime for all outlets daily. At UHPNT the areas include Penrose, Pencarrow, Torrington ICU and HDU, NICU, Lynher, Birch, Brent, Bracken, Mayflower and Plymouth Dialysis Unit.

Definitions

Low use outlets - refers to any taps and showers not used daily and used infrequently.

Augmented care areas for water controls include Adult, Neonatal and Paediatric Critical Care and High Dependency units, Oncology and Haematology wards and OPD, Renal ward and Day-Case units and Burns units.

Responsibilities of every member of staff:

Procedure to be followed where water outlets have been identified as low use in accordance with the Trusts' Water Management Policy and risk assessed as required for clinical use are subject to a regular flushing regime.

- Where possible, attend each outlet to be flushed in turn.
- Visually check for blockages of the waste outlet before starting the flushing procedure (paper towels/tissues/foreign objects etc.) and remove any obstructions.
- Turn on the cold water supply slowly to avoid splashing and increase to a reasonable flow.
- Check that the flushed water is free flowing to the waste outlet and draining through the waste outlet.
- Regulate flow accordingly to avoid overflow or excessive splashing.
- Flush the designated outlet for 5 minutes.
- Close the tap and repeat the process above with the hot water supply.
- Check local area for water splash and wipe dry any splashes.
- Move to the next outlet or complete the electronic flushing log as required for UHPNT and use paper flushing log for off-site areas (Appendix 1).
- Off-site Flushing log sheets to be sent to the Head of Engineering, Estates Department, Site Services, Derriford Hospital for data entry by the Estates Team (Appendix 2).
- Report any faults, damage or concerns to Site Services on **ext. 31300**.
- Approval for water contractors to undertake work can **only** be provided by the Site Services Department.
- The flushing regime must be maintained for closed to clinical use, e.g. Building Works – Planning Team, Estates Works – Estates, Temporary Closure – Matron.

If you are in any doubt about water safety please call the Site Services Helpdesk on **ext. 31300**.

The Hazard

It has been identified that a slip hazard may occur during the unattended flushing of water outlets due to basin overflow.

History

A previous occurrence of actual harm/injury has occurred due to the overflow of water from a clinical wash hand basin (CWHB) during the flushing process.

Due to the time consuming nature of outlet flushing it has become standard practice for a member of staff to turn on the tap at each outlet in turn. The staff member would then

continue to move through the department turning on water outlets until they were all flushed for the allocated time. Once completed, the staff member would return to the start point and turn off the water at each outlet.

In a number of separate locations, the waste water outlet had been both unintentionally and intentionally blocked with paper hand towels causing the water to back up in the basin.

In these instances the operative did not wait to check that the water was free flowing and drain through the waste before moving onto the next wash hand basin.

Notes

- 1 All high risk sinks and clinical wash hand basins will be fitted with separate hot/cold taps or mixer taps – ensure flushing of both hot and cold water services separately.
- 2 Where possible, remain at flushing location throughout the process.
- 3 If undertaking multiple simultaneous flushing, restrict the size of area undertaken – do not try to flush too many outlets and remain with the outlet long enough to establish that the water drainage is free flowing.

3 Regulatory Background

Health and Safety at work etc. Act 1974

Workplace Health Safety and Welfare Approved Code of Practice

Legionnaires' Disease – The Control of Legionella Bacteria in Water Systems Approved Code of Practice

Control of Substances Hazardous to Health Regulations

The Water Act 2003

4 Key Duties

Estates Team will set up the electronic recording procedure.

Matrons are responsible for identifying the low use outlets and risk assessing the ongoing need for the outlet. Infection Prevention and Control Team will assist in the assessment as requested. Matrons can include by exception the compliance with water safety in their quarterly reports to Infection Prevention Sub-Committee.

Ward/Clinical Department Managers are responsible for ensuring the flushing regime is performed and weekly submission of the data is completed.

Estates and Infection Prevention and Control programme of water walkabouts will include discussions and feedback compliance at ward and department level.

5 Monitoring and Assurance

Water flushing - to take place at every outlet that is not used within a 48 hour period. Periodic testing and water sampling is carried out under the supervision of the Estates Team.

Water flushing electronic log or paper sheets to be completed by every department to ensure flushing is taking place or that it is not applicable. The data paper submissions for off-site areas will be entered electronically and log sheets filed according to area.

Water Safety Group will meet monthly and will report on compliance with electronic submission and compliance with flushing regimes. Compliance and exception reporting will be presented at the Infection Prevention Sub Committee and Infection Control Committee.

The Trust will benefit from good Legionella control.

6 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set as five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved by the Head of Estates Engineering and the Water Assurance Group and ratified by Nick Thomas, Executive Director of Planning and Site Services.

Non-significant amendments to this document may be made, under delegated authority from the Head of Estates Engineering, by the nominated author. These must be ratified by Nick Thomas Director of Planning and Site Services and should be reported, retrospectively, to the Water Safety Group.

Significant reviews and revisions to this document will include a consultation with Water Safety Group and Infection Control Committee. For non-significant amendments, informal consultation will be restricted to Water Safety Group, Head of Estates and Senior Responsible Person for Water Management who are directly affected by the proposed changes

Dissemination and implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with Nick Thomas, Executive Director of Planning and Site Services and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

7 Reference material

List main references, including:

- Health Technical Memorandum 04-01: The Control of Legionella, hygiene, "safe" hot water, cold water and drinking water systems, Best Practice Guidance, Department of Health Estates and Facilities Division (2006) [Supersedes HTM 2027]. HTM 04-01 is divided into two parts:

Part A: Design, installation and testing

Part B: Operational Management

Health Technical Memorandum 04-01, Addendum: Pseudomonas Aeruginosa – advice for augmented care units

- Legionnaires' Disease – The Control of Legionella Bacteria in Water Systems Approved Code of Practice L8 (London: Health and Safety Executive) (2000).
- Minimising the risk of Legionnaires' disease CIBSE Technical Memoranda TM13 (London: Chartered Institution of Building Services Engineers) (2000)
- The Control of Substances Hazardous to Health Regulations 2002, SI 2002 No. 2677 (London: The Stationery Office) (2002)
- The Water Act 2003, HMSO (2003)
- Department of Health – Water sources and potential Pseudomonas Aeruginosa contamination of taps and water systems (2012)
- Regulatory agency (eg HSE, NPSA, NICE) regulations and guidelines
- Professional group rules, regulations and guidelines
- Accreditation and compliance assessments

Flushing user guide

1. Go to staff net and click “Log an Estates fault”



2. Sign in using the username and password given to you by a member of our team.



3. Once signed in click the “Work Orders” tab and then “In Progress”

Qube Planet

Main Work Orders Account

Welcome In Progress History

Welcome to your Estates & Facilities Team

Please supply customer feedback by the electronic form if requested

Please select Helpdesk to report a Fault/Defect.

To enquire about the status of any Work Request please e-mail plh-tr.Estates-Helpdesk@nhs.net or use the "Contact Us" link below quoting your Call Number.

For emergencies ring (4)31300.

Useful Contact Numbers:

Cleaning & Portering call Serco on 32300

Security & Swipe Access call Indigo on 32000

Medical Equipment & Beds call MEMS on 31333

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4. Find the relevant Work order for that week and click into it.

Qube Planet

Main Work Orders Account

Work Orders in Progress In Progress History

Home > In Progress

Page Size: 100

| WO Number | Work Order Type | Description | Person Code | Service By | Due | Started | Finished |
|-----------|-----------------|---|-------------|---------------|------------|------------|------------|
| 230749 | PM | Flushing Estates Building / Confirmation of water ... | | In House Team | 17/06/2019 | 20/06/2019 | 20/06/2019 |

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New Works User Guide

5. You will see the below screen, read the details and click **“Start Work”**

The screenshot shows the 'Work Order - 229438' form in the Qube Planet system. The form is titled 'Work Order Detail' and includes a navigation bar with 'Main', 'Work Orders', and 'Account'. Below the navigation bar, there are tabs for 'Action', 'Progress', and 'Information'. The form contains several sections: 'Description' (Flushing Lyther Ward / Confirmation of water use), 'Procedure' (WARDLUSH TW), 'Instructions' (Confirmation that all water outlets are either in regular use or have been flushed, and Water Flushing - to take place at every outlet that is not used within a 48 hour period), 'Complete In' (3), 'Service Kit', 'Priority' (C), 'Callers Ref.', 'Call No.', 'Has SoR', 'Has Safety Inst.', and 'Has ACMs'. A table below these sections lists site details: Site (1000, Deriford Site), Building (01, Deriford Hospital), Floor (L05, Level 05), Room, Asset Code, System (Flushing - Lyther), Department, and Zone. At the bottom of the form, there are four buttons: 'Start Work', 'Finish Work', 'Add a Progress Note', and 'View W.O. Card'. The 'Start Work' button is circled in red.

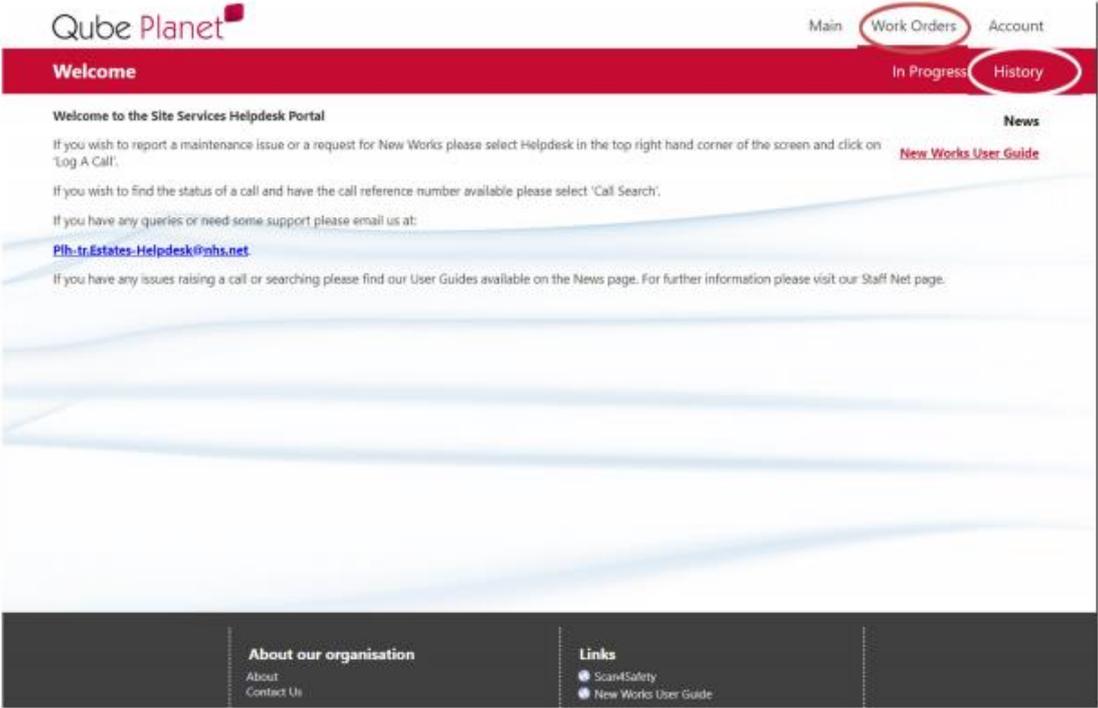
6. This takes you to the date and time screen, check the date and time are filled in correctly (this should be done automatically) and click **“Submit”**.

7. Once you're happy that all outlets have been flushed, click **“Finish Work”**

The screenshot shows the same 'Work Order - 229438' form as above, but with the 'Finish Work' button circled in red. The form content is identical to the previous screenshot, including the navigation bar, tabs, description, procedure, instructions, completion details, and site information table.

8. And that's it, if you have any notes to add you can add them on the final screen.

9. If you want to keep an audit trail of all previous logs, click the “History” tab which can be found under “Work Orders”. This will show all the completed flushing logs.



**University Hospitals Plymouth NHS Trust Off-site Units
Low use Water Outlet – Flush in accordance with the SOP**

Department _____

| Date | Outlet type (tap/shower) | Location room | Flushed Hot & Cold 5 mins each Yes/No | Notes * | Operatives Name | Comments | Signed | *Adequate drainage | *Foaming back from drain outlet |
|-------------|-------------------------------------|--------------------------|--|----------------|----------------------------|-----------------|---------------|-------------------------------|--|
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