



# STRAVICA

COMPANY POLICY | WATER HYGIENE & LEGIONELLA CONTROL

# Legionella & Water Hygiene Management

*Evidence-Led Control. Honest Reporting. Safer Water Systems.*



# Document Control

| Item                         | Detail                                                                                                                                                                                             |
|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Document Title</b>        | Legionella & Water Hygiene Management Policy                                                                                                                                                       |
| <b>Organisation</b>          | Stravica Ltd (Company No. 16756638)                                                                                                                                                                |
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| <b>Next Scheduled Review</b> | October 2027, or earlier following an outbreak or significant incident, a revision of ACoP L8, HSG274, HTM 04-01 or the relevant British Standards, or a significant change to Stravica's services |
| <b>Policy Owner</b>          | Adeola Olanrewaju, Director and Water Safety Lead                                                                                                                                                  |
| <b>Approved By</b>           | Adeola Olanrewaju, Director, on behalf of the Board of Stravica Ltd                                                                                                                                |
| <b>Distribution</b>          | Directors, staff, delivery partners, laboratories, clients and contracting authorities; published at <a href="http://www.stravica.uk">www.stravica.uk</a>                                          |
| <b>Classification</b>        | Public                                                                                                                                                                                             |

## Revision History

| Version    | Date        | Summary Of Change                                                                                                                                                                                                                                                                                                                     | Approved By             |
|------------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| <b>1.0</b> | 24 Oct 2026 | First issue. Establishes Stravica Ltd's framework for the management of Legionella and other water-borne pathogens across all water hygiene services, including risk assessment methodology, written scheme support, monitoring, sampling, remedial action, sector-specific arrangements, outbreak response, reporting and assurance. | A. Olanrewaju, Director |

## Related Stravica Policies

This policy is the technical core of Stravica's water hygiene management framework. It should be read alongside the Health & Safety Policy (STR-POL-HS-001), which covers the safety of people carrying out the work, the Environmental Policy (STR-POL-ENV-001), the Data Protection & GDPR Policy (STR-POL-DP-001), the Equality & Diversity Policy (STR-POL-ED-001), the Modern Slavery & Human Trafficking Policy (STR-POL-MS-001) and the Anti-Bribery & Corruption Policy (STR-POL-ABC-001).

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# 1. Introduction And Purpose

## 1.1 About Stravica Ltd

Stravica Ltd is a UK prime contractor specialising in water hygiene and Legionella control. We deliver Legionella risk assessments, water hygiene monitoring, Legionella and water sampling, water tank cleaning and disinfection, water system remedial works and planned water hygiene maintenance to housing, healthcare, education, local authority, transport and commercial clients. Stravica holds contractual accountability to each client and delivers services through vetted specialist delivery partners who are members of the Legionella Control Association, working under Stravica's contract management, technical governance and assurance.

## 1.2 Purpose

This policy sets out how Stravica Ltd manages the risk from Legionella bacteria and other water-borne pathogens in the water systems it assesses, monitors, samples, cleans, disinfects and maintains. It defines the technical standards, methods, responsibilities and assurance arrangements that apply on every Stravica contract. Its aim is that every client receives a consistent, evidence-led service that helps them meet their legal duties and keeps the people using their buildings safe.

## 1.3 Our Approach

Stravica's approach rests on four principles:

| Principle           | What It Means In Practice                                                                                                                             |
|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Risk-based</b>   | Every activity is driven by a suitable and sufficient risk assessment, and resources are focused where risk to people is greatest.                    |
| <b>Evidence-led</b> | Recommendations are based on what was found on site and in the data, not on assumptions or commercial interest.                                       |
| <b>Transparent</b>  | Clients are told promptly and plainly about significant risks, adverse results and gaps in control, and every result is reported exactly as received. |
| <b>Accountable</b>  | Stravica remains accountable as prime contractor for the quality of every service, whoever delivers it on site.                                       |

## 1.4 Objectives

- Help every client achieve and demonstrate compliance with ACoP L8 and HSG274, and with HTM 04-01 or SHTM 04-01 in healthcare premises.
- Identify and assess risk accurately, and recommend proportionate, prioritised control measures.
- Deliver monitoring, sampling and maintenance on time, to the correct method and frequency.
- Detect loss of control early and make sure it is acted on quickly.
- Protect people at higher risk, including older people and those with weakened immune systems.
- Provide clear, complete and verifiable records that support clients' own management and audit.

## 2. Scope

### 2.1 Water Systems Covered

- Hot and cold water systems in all types of building, including incoming mains, cold water storage tanks, booster sets, calorifiers and hot water storage, combination units, point-of-use water heaters, distribution pipework and outlets.
- Thermostatic mixing valves and thermostatic mixing taps.
- Showers, spray hoses, baths, assisted baths and sanitary outlets.
- Spa pools and hydrotherapy pools, where included in the contract.
- Other risk systems identified during risk assessment, such as water features, vehicle washes, sprinkler and hose reel systems, humidifiers, air washers, emergency showers and eye wash stations.
- On-train and depot water systems for transport clients.

### 2.2 Systems Outside Standard Scope

Evaporative cooling towers and evaporative condensers are not part of Stravica's standard service. Where such systems are identified during a risk assessment, Stravica will highlight them to the client, record the duty to notify the local authority under the Notification of Cooling Towers and Evaporative Condensers Regulations 1992, and recommend that they are managed by a specialist in accordance with HSG274 Part 1.

### 2.3 Pathogens Covered

The primary focus of this policy is Legionella bacteria. In healthcare and other augmented care settings, and where clients require it, the policy also covers Pseudomonas aeruginosa and other opportunistic water-borne pathogens, together with general microbiological water quality indicators such as total viable counts, E. coli and coliforms.

## 3. Legal And Technical Framework

| Instrument                                                        | Role In Stravica's Services                                                                                                                 |
|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Health and Safety at Work etc. Act 1974</b>                    | General duties on employers and those in control of premises, including landlords, towards employees and others.                            |
| <b>Management of Health and Safety at Work Regulations 1999</b>   | Duty to assess risks and to appoint competent persons.                                                                                      |
| <b>Control of Substances Hazardous to Health Regulations 2002</b> | Legionella is a biological agent; risk must be assessed and prevented or controlled.                                                        |
| <b>HSE ACoP L8 (4th edition, 2013)</b>                            | The Approved Code of Practice for controlling Legionella bacteria in water systems. Following it is normally enough to comply with the law. |
| <b>HSG274 Parts 1, 2 and 3</b>                                    | HSE technical guidance on evaporative cooling systems, hot and cold water systems and other risk systems.                                   |
| <b>HSG282</b>                                                     | Control of Legionella and other infectious agents in spa-pool systems.                                                                      |

| Instrument                                                                      | Role In Stravica's Services                                                                                                                                                  |
|---------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>HTM 04-01 Parts A, B and C; SHTM 04-01; WHTM 04-01</b>                       | Safe water in healthcare premises in England, Scotland and Wales, including Water Safety Groups, Water Safety Plans and Pseudomonas aeruginosa management in augmented care. |
| <b>BS 8580-1:2019</b>                                                           | Code of practice for Legionella risk assessments.                                                                                                                            |
| <b>BS 8580-2:2022</b>                                                           | Risk assessments for Pseudomonas aeruginosa and other water-borne pathogens.                                                                                                 |
| <b>BS 7592:2022</b>                                                             | Sampling for Legionella bacteria in water systems.                                                                                                                           |
| <b>BS 8558:2015 and BS EN 806</b>                                               | Design, installation, flushing, disinfection and maintenance of water installations.                                                                                         |
| <b>BS 8680:2020</b>                                                             | Water Safety Plans.                                                                                                                                                          |
| <b>Water Supply (Water Fittings) Regulations 1999 and Scottish Byelaws 2014</b> | Requirements for fittings and installations to prevent contamination, waste and misuse.                                                                                      |
| <b>Legionella Control Association Code of Conduct</b>                           | Service standards for Legionella control service providers.                                                                                                                  |

Where a client's own policy, written scheme or Water Safety Plan sets a stricter standard than this policy, the client's standard applies on that contract.

## 4. Understanding The Risk

### 4.1 Legionella And Legionnaires' Disease

Legionella bacteria are common in natural water sources at low levels. They become a risk when they multiply in building water systems and are then inhaled in fine droplets or aerosols, such as from showers, spray taps or hoses. Legionnaires' disease is a potentially fatal form of pneumonia. Symptoms usually appear between two and ten days after exposure, and around one in ten people who contract it die. Legionella can also cause milder, flu-like illnesses known as Pontiac fever and Lochgoyle fever.

### 4.2 Conditions That Increase Risk

| Condition                                               | Why It Matters                                                                                                                                     |
|---------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Water temperature between 20°C and 45°C</b>          | The range in which Legionella multiplies                                                                                                           |
| <b>Stagnation and low use</b>                           | Allows bacteria to multiply; common in dead legs, little-used outlets, oversized storage and empty buildings                                       |
| <b>Scale, sediment, rust, sludge and organic matter</b> | Provide nutrients and shelter for bacteria                                                                                                         |
| <b>Biofilm</b>                                          | A slime layer on internal surfaces that protects bacteria from heat and biocides                                                                   |
| <b>Aerosol generation</b>                               | The route by which people are exposed                                                                                                              |
| <b>Susceptible people</b>                               | People over 45, smokers, heavy drinkers, people with chronic respiratory or kidney disease, diabetes or weakened immune systems are at higher risk |

### 4.3 Other Water-Borne Pathogens

*Pseudomonas aeruginosa* is a significant cause of infection in vulnerable patients, particularly in augmented care units such as intensive care, neonatal, burns and haematology units. It colonises outlets, taps, drains and flexible hoses. Non-tuberculous mycobacteria and other opportunistic pathogens can also present risks in healthcare settings. Stravica's healthcare arrangements are set out in Section 16.

## 5. Statement Of Intent

Stravica Ltd is committed to helping its clients control the risk from Legionella and other water-borne pathogens, and to protecting the people who use their buildings. We will provide services that are competent, evidence-led and honest, and we will tell clients what they need to know about their water systems, promptly and plainly.

Stravica Ltd will:

- Deliver every service in accordance with ACoP L8, HSG274, the relevant British Standards, healthcare technical guidance where applicable, and the LCA Code of Conduct.
- Deliver services only through competent delivery partners who are members of the Legionella Control Association, using UKAS-accredited laboratories.
- Make clients aware of their legal responsibilities as Duty Holders.
- Carry out risk assessments that are suitable and sufficient, and recommendations that are proportionate and prioritised.
- Carry out monitoring and maintenance at the correct frequency and record actual results.
- Report significant risks and adverse results promptly, exactly as found, and recommend appropriate action.
- Support clients and public health authorities fully in the event of a suspected outbreak.
- Audit our own services and continually improve them.

#### Policy Approval

- Signed on behalf of Stravica Ltd by Adeola Olanrewaju, Director.
- Date of approval: 24 October 2026.
- This statement is issued to every delivery partner and published at [www.stravica.uk](http://www.stravica.uk).

## 6. Roles: Duty Holders, Responsible Persons And Stravica

Clear roles are essential to effective Legionella control. ACoP L8 places legal responsibility on the Duty Holder, which is the employer or person in control of premises. Stravica supports the Duty Holder; it does not replace them unless this is expressly agreed in writing.

| Role               | Held By             | Responsibilities                                                                                                                      |
|--------------------|---------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>Duty Holder</b> | Client organisation | Legal responsibility for identifying, assessing and controlling Legionella risk; appointing a Responsible Person; providing resources |

| Role                                      | Held By                                       | Responsibilities                                                                                                                                                                                                 |
|-------------------------------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Responsible Person and Deputy</b>      | Appointed by the client                       | Day-to-day management of the written scheme; acting on findings and recommendations; maintaining the logbook                                                                                                     |
| <b>Authorising Engineer (Water)</b>       | Appointed by healthcare clients               | Independent assurance and advice on water safety in healthcare premises                                                                                                                                          |
| <b>Water Safety Group</b>                 | Convened by healthcare and some other clients | Multidisciplinary oversight of the Water Safety Plan and adverse events                                                                                                                                          |
| <b>Stravica Water Safety Lead</b>         | Stravica Director                             | Technical governance of Stravica contracts; verifying delivery partner competence; reviewing results and escalations; attending Water Safety Groups where required; single point of accountability to the client |
| <b>Delivery Partner Competent Persons</b> | Appointed delivery partner                    | Carrying out risk assessments, monitoring, sampling, cleaning, disinfection and remedial works to the required standards; supervising operatives                                                                 |
| <b>Laboratory</b>                         | UKAS ISO/IEC 17025-accredited laboratory      | Microbiological analysis and reporting                                                                                                                                                                           |

## 6.1 Informing Clients Of Their Responsibilities

At mobilisation, Stravica confirms the identity of the client's Duty Holder and Responsible Person, and provides a written summary of the Duty Holder's key legal obligations. Where no Responsible Person has been appointed, or where the client's arrangements appear inadequate, Stravica will say so in writing and recommend what is needed.

## 7. Industry Standards: The LCA Code Of Conduct

Stravica requires every delivery partner providing water hygiene services on its contracts to be a member of the Legionella Control Association for the services concerned, and to follow the LCA Code of Conduct. Stravica applies the same principles to its own contract management.

| Commitment                                                    | How Stravica Applies It                                                                    |
|---------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <b>Clients are made aware of their legal obligations</b>      | Written summary at mobilisation; reminders in reports where obligations are not being met  |
| <b>Services are delivered by trained and competent people</b> | Competence verification before deployment (Section 23)                                     |
| <b>Services are clearly defined and agreed</b>                | Scope, frequencies and methods confirmed in writing at mobilisation                        |
| <b>Significant risks are communicated promptly</b>            | Same-day verbal notice and written confirmation within 24 hours (Section 22)               |
| <b>Records are accurate and complete</b>                      | Time-stamped digital records and integrity checks                                          |
| <b>Conflicts of interest are avoided or managed</b>           | Independent, evidence-based recommendations (Anti-Bribery & Corruption Policy, Section 12) |

| Commitment                             | How Stravica Applies It                                                              |
|----------------------------------------|--------------------------------------------------------------------------------------|
| <b>Complaints are handled properly</b> | Stravica complaints procedure, with escalation to the LCA available where applicable |

## 8. Contract Mobilisation

Effective control starts with a thorough understanding of each estate. Before routine services begin, Stravica carries out a structured mobilisation.

1. Information gathering: existing risk assessments, written schemes, logbooks, asset registers, schematic drawings, previous monitoring and sampling results, remedial actions outstanding, asbestos registers, access arrangements and occupant vulnerability information (see Appendix E).
2. Gap analysis: Stravica reviews the information against ACoP L8 and identifies gaps, such as out-of-date risk assessments, missing schematics, overdue remedials or monitoring records that do not meet the required frequency.
3. Baseline report: the gaps are reported to the client with a prioritised plan to address them.
4. Scope confirmation: services, frequencies, sample points, reporting formats, escalation contacts and KPIs are agreed in writing.
5. Programme set-up: the monitoring and maintenance programme is loaded into a digital system so that every task is scheduled and tracked.
6. Delivery partner briefing: named operatives are inducted on the client's estate, procedures, access, escalation routes and occupant needs.
7. First-cycle review: after the first full monitoring cycle, results are reviewed with the client and the programme is adjusted if needed.

## 9. Legionella Risk Assessment

### 9.1 Standard

All Legionella risk assessments are carried out in accordance with ACoP L8, HSG274 and BS 8580-1, and BS 8580-2 where *Pseudomonas aeruginosa* or other water-borne pathogens are relevant. Assessments are carried out by competent risk assessors who hold accredited training and relevant experience of comparable premises.

### 9.2 Method

1. Pre-visit review of previous assessments, records and drawings.
2. Review of management arrangements, including Duty Holder and Responsible Person appointments, the written scheme, training, communication and record keeping.
3. Full site survey of the water systems from the point of entry to every outlet, including plant rooms, tank rooms, roof spaces and risers where safely accessible.
4. Asset register recording every relevant asset, with location, condition and photographs.
5. Schematic diagram of each system, updated or created where none exists.
6. Temperature measurements at the incoming main, storage, calorifier flow and return, and a representative selection of outlets, including sentinels.

7. Inspection of cold water storage tanks for condition, lid fit, insulation, screens, overflow and evidence of contamination.
8. Identification of dead legs, blind ends, little-used outlets, oversized storage, heat gain, poor circulation and unsuitable materials.
9. Assessment of the occupants and their susceptibility.
10. Scoring of risk, combining the likelihood of bacterial growth and aerosol exposure with the susceptibility of people exposed.
11. Prioritised recommendations and a suggested review date.

### 9.3 Report Content

Every report contains the elements listed in Appendix A, in clear language that a non-specialist Responsible Person can act on. Recommendations are prioritised by risk with clear timescales: immediate, short term, medium term or as part of planned improvement. Each recommendation states the evidence for it.

### 9.4 Significant Findings On Site

If the assessor finds a significant risk on site, it is reported to the client verbally the same day and confirmed in writing within 24 hours, without waiting for the full report. Examples include stored hot water well below 60°C, a contaminated or uncovered tank, or an outlet serving vulnerable people that is clearly at risk.

### 9.5 Review Of Risk Assessments

Risk assessments are reviewed regularly, and whenever there is reason to believe they may no longer be valid. The triggers are listed in Appendix B. Stravica recommends review intervals based on risk and tracks them for each client, so that reviews are not missed.

## 10. Written Scheme Of Control

ACoP L8 requires the Duty Holder to have a written scheme for preventing or controlling the risk identified in the risk assessment. Where the contract includes it, Stravica prepares or updates the written scheme for the client's approval. Stravica's written schemes include:

- An up-to-date schematic plan of each water system.
- A description of the correct and safe operation of each system.
- The control methods and precautions to be used.
- The checks to be carried out, their frequency, and the acceptable results.
- The remedial action to be taken if control is not achieved.
- The people responsible for each element, with contact details and deputies.
- Arrangements for record keeping and review.
- Arrangements for periods when the building or parts of it are not in use.

The written scheme is the client's document. Stravica's monitoring and maintenance programme is built directly from it, so that every task on the programme can be traced back to a requirement in the scheme.

## 11. Control Strategies

### 11.1 Temperature Control

Temperature control is the traditional and most common strategy for hot and cold water systems. Hot water is stored at 60°C or above and distributed so that it reaches at least 50°C at outlets within one minute (55°C in healthcare premises). Cold water is stored and distributed below 20°C. Where temperature control is not achieved, Stravica investigates the cause and recommends remedial action.

### 11.2 Biocide And Alternative Treatments

Where clients use alternative or additional control methods, such as chlorine dioxide, copper-silver ionisation or other biocide systems, Stravica's monitoring includes the parameters needed to confirm that the treatment is effective, in line with HSG274 and the supplier's guidance. Where a treatment system is used, routine Legionella sampling is normally recommended to verify control.

### 11.3 Design And Physical Controls

- Removing dead legs, blind ends and redundant outlets.
- Reducing oversized cold water storage to improve turnover.
- Insulating pipework and tanks to prevent heat gain and heat loss.
- Balancing hot water circulation so that temperatures are achieved throughout.
- Positioning TMVs as close as practicable to outlets.
- Replacing unsuitable materials, such as certain flexible hoses that support microbial growth.
- Ensuring tanks have tight-fitting lids, screened vents and overflows, and adequate insulation.

### 11.4 Usage And Flushing

Regular use prevents stagnation. Outlets that are used less than weekly are flushed at least weekly and the flushing is recorded, or they are removed if they are not needed. Section 15 sets out Stravica's approach.

## 12. Monitoring Programme

Routine monitoring confirms that control measures are working. Stravica's standard monitoring frequencies follow HSG274 Part 2, adjusted where the risk assessment or the client's written scheme requires.

| Task                                           | Standard Frequency               | Acceptable Result                                             |
|------------------------------------------------|----------------------------------|---------------------------------------------------------------|
| <b>Sentinel hot outlets</b>                    | Monthly                          | At least 50°C within one minute (55°C in healthcare)          |
| <b>Sentinel cold outlets</b>                   | Monthly                          | Below 20°C within two minutes                                 |
| <b>Calorifier flow and return temperatures</b> | Monthly                          | Flow at least 60°C; return at least 50°C (55°C in healthcare) |
| <b>Point-of-use water heaters</b>              | As determined by risk assessment | At least 50°C to 60°C, as appropriate to the unit             |

| Task                                        | Standard Frequency                                                                             | Acceptable Result                                                 |
|---------------------------------------------|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>Representative outlets on rotation</b>   | Annually, so all outlets are covered over time                                                 | Hot and cold standards as above                                   |
| <b>Cold water storage tank temperatures</b> | Every six months (summer and winter)                                                           | Below 20°C                                                        |
| <b>Cold water storage tank inspection</b>   | Annually                                                                                       | Clean, covered, insulated, screened, free of debris or vermin     |
| <b>Calorifier inspection</b>                | Annually, with draining or blowdown as determined by risk assessment and manufacturer guidance | Free of excessive sludge; correct operation                       |
| <b>Showers and spray hoses</b>              | Quarterly cleaning, descaling and disinfection, or as determined by risk assessment            | Visibly clean and free from scale                                 |
| <b>Little-used outlets</b>                  | Weekly flushing (usually by the client's staff, recorded)                                      | Flushed and recorded                                              |
| <b>Thermostatic mixing valves</b>           | At least annually, or as determined by risk assessment or HTM 04-01 in healthcare              | Fail-safe operation; strainers clean; correct blended temperature |
| <b>Biocide treatment systems</b>            | As set out in HSG274 for the system type                                                       | Biocide levels within target range                                |

## 12.1 How Monitoring Is Carried Out

- Temperatures are measured with calibrated digital thermometers. Calibration is checked against a reference at least annually and recorded.
- Readings are taken at the correct time intervals, recorded at the point of work in a time-stamped digital record and never estimated.
- Any reading outside the acceptable range is re-tested, recorded as found and escalated in line with Appendix D.
- Where an outlet cannot be accessed, this is recorded with the reason and reported to the client within one working day, with a revisit arranged within the monitoring interval.

## 13. Sampling Strategy

### 13.1 When Sampling Is Recommended

Legionella sampling verifies whether control measures are effective. It does not replace them. In line with HSG274 Part 2, Stravica recommends Legionella sampling:

- Where control parameters, such as temperatures or biocide levels, are not being consistently achieved.
- In systems treated with biocides, where storage and distribution temperatures are reduced from the standard levels.
- Where an outbreak is suspected or has been identified.
- Where the system supplies people at increased risk, such as in healthcare premises or care homes.
- After disinfection or significant remedial works, to verify the outcome where specified.

- Following prolonged periods of disuse, before reoccupation, where the risk assessment requires it.

## 13.2 Sampling Method

- Samples are taken by trained operatives in accordance with BS 7592:2022, using sterile containers with the correct neutralising agent.
- The sample type, which may be pre-flush to reflect the outlet or post-flush to reflect the system, is chosen to answer the question being asked, and recorded.
- Sample points are chosen to be representative, including sentinels, outlets serving vulnerable people and areas of known concern.
- Each sample is labelled with a unique reference, location, date, time, temperature and sample type. Residents' names are never used.
- Samples are kept cool and dark and delivered to a UKAS ISO/IEC 17025-accredited laboratory under chain of custody, so that analysis begins within the time limits of the analytical method.

## 13.3 Interpreting Results

Results are interpreted against the action levels in HSG274 Part 2, or the client's Water Safety Plan in healthcare, and reported with a clear explanation and recommended actions. Appendix D sets out the action levels and Stravica's notification timescales. Results are always considered together with temperatures, the condition of the system and the susceptibility of occupants. A single result is never interpreted in isolation.

# 14. Cleaning, Disinfection And Remedial Works

## 14.1 When Cleaning And Disinfection Are Needed

- When a cold water storage tank inspection shows contamination, sediment, debris, vermin or biofilm.
- When sampling shows significant colonisation.
- After a new installation, an extension or significant modification, or after a system has been opened for repairs.
- After prolonged disuse, where the risk assessment requires it.
- As part of outbreak control, when agreed with the investigating authorities.

## 14.2 Standards

Cleaning and disinfection are carried out in accordance with HSG274 Part 2, BS 8558 and BS EN 806-4, under a written method statement and permit to work, by trained operatives. The safety, environmental and occupant protection arrangements in the Health & Safety Policy and the Environmental Policy apply. Disinfection is verified by testing at the end of the contact period and, where specified, by microbiological sampling before the system is returned to use. A completion certificate is issued with before-and-after photographs.

## 14.3 Remedial Works

Remedial works recommended in risk assessments are quoted separately. Clients are free to choose any competent contractor. Works are carried out to the Water Supply (Water Fittings) Regulations 1999 or the Scottish Byelaws using compliant materials. Each completed remedial is recorded against the original recommendation, so that the client's action plan and risk assessment can be updated and closed.

## 15. Little-Used Outlets And Flushing

Little-used outlets are one of the most common causes of Legionella colonisation. Stravica's approach is:

1. Identify every outlet used less than weekly during the risk assessment, with input from the client on actual usage.
2. Recommend permanent removal of outlets that are not needed, including the associated pipework, so that no dead leg remains.
3. Where an outlet must remain, establish a weekly flushing regime. The flush lasts long enough to draw fresh water through and reach stable temperatures, and is carried out in a way that minimises aerosol.
4. Ensure flushing is recorded, whoever carries it out. Where the client's staff carry out flushing, Stravica provides a simple recording method and checks the records.
5. Review flushing records monthly and report gaps to the client.

## 16. Healthcare And Augmented Care Settings

Healthcare premises carry the highest risk because of the vulnerability of patients. On healthcare contracts, Stravica applies HTM 04-01 (or SHTM 04-01 in Scotland and WHTM 04-01 in Wales) in addition to ACoP L8 and HSG274.

- Stravica works within the client's Water Safety Plan and reports to the Water Safety Group in the format the group requires.
- Stravica liaises with the client's Authorising Engineer (Water) and Responsible Person (Water), and provides the information they need for assurance.
- Hot water distribution temperatures of at least 55°C apply.
- In augmented care units, Pseudomonas aeruginosa risk assessment follows BS 8580-2, and Pseudomonas sampling is carried out at the frequency set by the Water Safety Plan, typically every six months.
- Any detection of Legionella or Pseudomonas aeruginosa in augmented care is reported to the client by telephone on the same day.
- Operatives follow infection prevention and control requirements, including hand hygiene, clean equipment, and protocols for entering patient areas.
- Work in clinical areas is planned with ward staff to minimise disruption and protect patients' privacy and dignity.

## 17. Housing And Residential Settings

Landlords have a legal duty to assess and control the risk of Legionella in the properties they let. There is no legal requirement for a "Legionella certificate". What the law requires is a suitable risk assessment and proportionate control.

| Setting                                              | Stravica Approach                                                                                                           |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| <b>General needs housing with individual systems</b> | Proportionate risk assessment, often on a representative sampling basis by property type and system, agreed with the client |
| <b>Communal systems in blocks</b>                    | Full risk assessment of shared storage and distribution; communal tank inspections; sentinel monitoring                     |

| Setting                                            | Stravica Approach                                                                                                                   |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| <b>Sheltered, extra care and supported housing</b> | Treated as higher risk because of resident age and vulnerability; full monitoring programme; TMV checks; communal shower management |
| <b>Void properties</b>                             | Systems flushed and, where the risk assessment requires it, tanks drained or disinfected before re-letting; flushing recorded       |
| <b>Houses in multiple occupation</b>               | Assessment of shared facilities and stored water; landlord advised on tenant information                                            |

Stravica can provide clients with plain-English advice for tenants, such as flushing showers after holidays, keeping shower heads clean and reporting hot water problems, to support tenants in playing their part.

## 18. Education, Transport, Leisure And Other Settings

| Setting                                   | Key Considerations                                                                                                                                                                                                                                                      |
|-------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Schools, colleges and universities</b> | Long closure periods during holidays create stagnation. Flushing and, where needed, sampling are planned before reopening. Sports hall and changing room showers require particular attention. Halls of residence are managed in a similar way to residential premises. |
| <b>Transport depots and rolling stock</b> | On-board water systems and depot fill points are assessed, monitored and sampled in line with the client's requirements and fleet maintenance cycles. Water is protected from contamination at fill points.                                                             |
| <b>Leisure and spa facilities</b>         | Spa and hydrotherapy pools are managed under HSG282. Showers and changing facilities are high-use but may stagnate in quiet periods.                                                                                                                                    |
| <b>Offices and public buildings</b>       | Usage patterns, particularly hybrid working, can leave parts of systems under-used. Flushing regimes reflect actual occupancy.                                                                                                                                          |
| <b>Care homes</b>                         | Treated as high risk because of resident vulnerability. Assisted baths and TMVs require careful management, and scalding risk is controlled alongside Legionella risk.                                                                                                  |

## 19. Building Closures, Low Occupancy And Reoccupation

When buildings or parts of buildings are closed or lightly used, water stagnates and the risk of Legionella increases. Stravica supports clients through closures as follows:

- Before closure: agree with the client whether to maintain flushing and temperature control, or to drain down and isolate systems safely.
- During closure: continue weekly flushing of outlets and maintain stored hot water at 60°C or above where systems remain live. Continue monitoring.
- Before reoccupation: flush the whole system thoroughly; check temperatures; inspect tanks; clean and disinfect where the risk assessment requires it; carry out sampling where appropriate; review the risk assessment.
- New buildings and refurbishments: ensure systems are commissioned, flushed and disinfected correctly, and that the period between filling and occupation is managed to prevent stagnation.

## 20. Outbreak And Incident Response

In the event of a case or suspected outbreak of Legionnaires' disease connected with a site, the investigation is led by the local authority Environmental Health Officer, the UK Health Security Agency or Public Health Scotland, and the HSE where appropriate. Stravica's role is to support the client and the investigating authorities fully.

1. Stravica's Water Safety Lead is informed immediately and contacts the client's Duty Holder.
2. No disinfection, draining or alteration of systems is carried out without the agreement of the investigating authority, because sampling evidence must be preserved.
3. Stravica provides all relevant records promptly: risk assessments, written scheme, monitoring records, sampling results and maintenance records.
4. Stravica attends the Incident Management Team if requested.
5. Investigative sampling is carried out as directed by the authorities, under strict chain of custody.
6. Once authorised, emergency control measures are implemented. These may include outlet restriction, point-of-use filtration, raised temperatures, disinfection and remedial works.
7. Post-incident, the risk assessment and written scheme are reviewed, and lessons learned are shared.

All information about cases is handled as highly sensitive health data under the Data Protection & GDPR Policy.

## 21. Records And Logbooks

ACoP L8 requires records of the risk assessment, the written scheme, and the results of monitoring, inspection, testing and checks to be kept for at least five years. Stravica maintains complete, accurate digital records for every client, including:

- The names of the people carrying out the work and their competence.
- The significant findings of each risk assessment, with the dates of assessment and review.
- The written scheme and its updates.
- The results of every monitoring task, inspection, test and check, with the date and time.
- Sampling records, chain of custody and laboratory certificates.
- Details of remedial actions, cleaning and disinfection, with dates and certificates.
- Records of access failures and the actions taken.

Records are available to the client at any time through the agreed reporting system, and are handed over in full at the end of the contract. Record integrity is protected by the controls in the Anti-Bribery & Corruption Policy.

## 22. Reporting To Clients

| Report                                       | Timescale                                         | Content                                     |
|----------------------------------------------|---------------------------------------------------|---------------------------------------------|
| <b>Significant risk found on site</b>        | Verbally the same day; in writing within 24 hours | Finding, risk, immediate recommended action |
| <b>Adverse sampling or monitoring result</b> | As set out in Appendix D                          | Result, interpretation, recommended action  |

| Report                                          | Timescale                                      | Content                                                                                                              |
|-------------------------------------------------|------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| <b>Task completion records and certificates</b> | Within five working days                       | Results, photographs, completion certificate                                                                         |
| <b>Risk assessment report</b>                   | Within 15 working days of survey, or as agreed | Full report as described in Appendix A                                                                               |
| <b>Monthly contract report</b>                  | Monthly                                        | Tasks scheduled and completed, results outside range, access failures, sampling results, outstanding remedials, KPIs |
| <b>Annual review</b>                            | Annually                                       | Trends, compliance status, recommendations for the year ahead                                                        |

Reports are written so that a non-specialist Responsible Person can understand them and act on them. Each report states clearly what is compliant, what is not, and what the client needs to do.

## 23. Competence

ACoP L8 requires that anyone carrying out risk assessments or control activities is competent, with the necessary skills, knowledge and experience. Stravica verifies the competence of every delivery partner operative, assessor and supervisor before they work on a Stravica contract. Verification includes accredited training certificates, relevant experience, and observation during Stravica audits. The minimum training requirements for each role are set out in Section 13 of the Health & Safety Policy. Expired training results in removal from Stravica contracts until it is renewed.

## 24. Delivery Partner Requirements

- Current Legionella Control Association membership for the services delivered.
- Use of UKAS ISO/IEC 17025-accredited laboratories, with schedules covering the required analyses.
- Competent, trained and supervised workforce, verified as described in Section 23.
- Calibrated equipment with records.
- Digital, time-stamped recording systems that meet Stravica's reporting requirements.
- Full, unredacted, site-specific RAMS and method statements for every contract.
- Compliance with all Stravica policies.
- Participation in Stravica audits, contract reviews and continual improvement.

## 25. Technical Assurance, KPIs And Review

### 25.1 Assurance Activities

- Review of every adverse result and its escalation.
- Quarterly data integrity checks on monitoring records.
- Unannounced spot checks that re-take readings at a sample of outlets, at least quarterly per contract.
- Annual technical review of a sample of risk assessments by a competent person not involved in them.
- Annual review of each delivery partner's LCA membership, laboratory accreditation and competence records.

### 25.2 Key Performance Indicators

| KPI                                                                                                      | Target       |
|----------------------------------------------------------------------------------------------------------|--------------|
| Scheduled monitoring tasks completed within the required interval (excluding documented access failures) | 100%         |
| Adverse results notified to clients within the Appendix D timescales                                     | 100%         |
| Significant risks reported verbally the same day                                                         | 100%         |
| Risk assessment reports issued within the agreed timescale                                               | At least 95% |
| Access failures reported within one working day                                                          | 100%         |
| Completion records issued within five working days                                                       | At least 95% |
| Risk assessment reviews completed by the due date                                                        | 100%         |
| Delivery partners with current LCA membership                                                            | 100%         |
| Thermometers with in-date calibration                                                                    | 100%         |

### 25.3 Review

The Water Safety Lead reviews these measures monthly for each contract and quarterly across all contracts. This policy is reviewed annually, and whenever ACoP L8, HSG274, HTM 04-01 or the relevant British Standards are revised, or following a significant incident.

## Appendix A – Risk Assessment Report Content

| Section                           | Content                                                                              |
|-----------------------------------|--------------------------------------------------------------------------------------|
| <b>Executive summary</b>          | Overall risk rating; key findings; priority actions in plain English                 |
| <b>Scope and limitations</b>      | Systems and areas assessed; any areas not accessed and why                           |
| <b>Management review</b>          | Duty Holder, Responsible Person, training, written scheme, records and communication |
| <b>System description</b>         | Each system from incoming main to outlets                                            |
| <b>Schematic diagram</b>          | Up-to-date schematic of each system                                                  |
| <b>Asset register</b>             | Every relevant asset with location, condition and photograph                         |
| <b>Temperature survey</b>         | Measured temperatures against standards                                              |
| <b>Occupant susceptibility</b>    | Profile of people using the building and any vulnerable groups                       |
| <b>Risk scoring</b>               | Method and results for each system or area                                           |
| <b>Recommendations</b>            | Prioritised actions with timescales, responsibility and the evidence for each        |
| <b>Monitoring recommendations</b> | Recommended monitoring programme and frequencies                                     |
| <b>Review date</b>                | Recommended date for the next review                                                 |
| <b>Assessor details</b>           | Name, competence and signature                                                       |

## Appendix B – Risk Assessment Review Triggers

A risk assessment should be reviewed whenever there is reason to suspect it is no longer valid, including:

1. Changes to the water system or its use.
2. Changes to the use of the building, such as a change of occupants or a change in their susceptibility.
3. New information about risks or control measures becoming available.
4. Checks showing that control measures are no longer effective.
5. Adverse sampling results.
6. A case or outbreak of Legionnaires' disease associated with the system.
7. Changes to key personnel, such as the Responsible Person.
8. A change in legislation, the Approved Code of Practice or guidance.
9. Completion of significant remedial works.
10. Expiry of the review interval recommended in the assessment.

## Appendix C – Annual Monitoring Calendar

| Frequency          | Tasks                                                                                                                                                       |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Weekly</b>      | Flush little-used outlets (recorded); flush or drain items such as emergency showers where included                                                         |
| <b>Monthly</b>     | Sentinel hot and cold outlet temperatures; calorifier flow and return; point-of-use heaters where specified; review of flushing records                     |
| <b>Quarterly</b>   | Clean, descale and disinfect showers and spray hoses; review sampling where on a quarterly regime                                                           |
| <b>Six-monthly</b> | Cold water storage tank temperatures (summer and winter); Pseudomonas sampling in augmented care where required                                             |
| <b>Annually</b>    | Cold water storage tank inspection; calorifier inspection; TMV service; representative outlet temperatures; thermometer calibration; annual contract review |
| <b>As required</b> | Risk assessment review; sampling triggered by loss of control; cleaning and disinfection; remedial works; closures and reoccupation                         |

## Appendix D – Action Levels And Notification

| Finding                                                           | Action Level (HSG274 Part 2)                                                                               | Notification To Client                                                    | Recommended Response                                                                                                                                                                    |
|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Legionella not detected or below 100 cfu/l</b>                 | Under control                                                                                              | Routine report                                                            | Continue the written scheme                                                                                                                                                             |
| <b>Legionella 100 to 1,000 cfu/l</b>                              | Resample if only one or two samples are positive; if most are positive, low-level colonisation is possible | In writing within 24 hours of the result                                  | Resample; review controls and the risk assessment; consider disinfection                                                                                                                |
| <b>Legionella above 1,000 cfu/l</b>                               | Significant colonisation                                                                                   | Telephone the same day; written confirmation within 24 hours              | Resample; immediate review of controls; remedial action, which may include disinfection; consider outlet restriction or point-of-use filters, especially where occupants are vulnerable |
| <b>Any Legionella or Pseudomonas aeruginosa in augmented care</b> | Per the Water Safety Plan                                                                                  | Telephone the same day                                                    | As decided by the Water Safety Group                                                                                                                                                    |
| <b>Temperatures outside the acceptable range</b>                  | Loss of temperature control                                                                                | In writing within 24 hours; same day where vulnerable people are affected | Investigate the cause; re-test; raise remedial works                                                                                                                                    |
| <b>Tank contamination, vermin or missing lid</b>                  | Risk to water quality                                                                                      | Same day                                                                  | Clean, disinfect and repair                                                                                                                                                             |

| Finding                                            | Action Level (HSG274 Part 2) | Notification To Client | Recommended Response                   |
|----------------------------------------------------|------------------------------|------------------------|----------------------------------------|
| <b>Monitoring missed because of access failure</b> | Compliance gap               | Within one working day | Revisit within the monitoring interval |

## Appendix E – Mobilisation Information Checklist

- Names and contact details of the Duty Holder, Responsible Person and Deputy.
- Current risk assessments for every site, with dates.
- Written scheme of control.
- Asset registers and schematic drawings.
- Monitoring records for at least the previous 12 months.
- Sampling results for at least the previous 24 months.
- Outstanding remedial actions and their status.
- Asbestos registers for areas where work will take place.
- Access arrangements, keys and permit systems.
- Occupant profile, including vulnerability information shared under data protection controls.
- Water treatment systems in use and the supplier's details.
- Any history of Legionella detections or cases.
- Water Safety Plan and Water Safety Group arrangements (healthcare).
- Reporting and escalation contacts, including out of hours.

## Appendix F – Glossary

| Term                      | Meaning                                                                                     |
|---------------------------|---------------------------------------------------------------------------------------------|
| <b>ACoP L8</b>            | HSE Approved Code of Practice for the control of Legionella bacteria in water systems       |
| <b>Augmented care</b>     | Healthcare units where patients are at increased risk from water-borne pathogens            |
| <b>Biofilm</b>            | A layer of micro-organisms on internal surfaces that protects bacteria                      |
| <b>Calorifier</b>         | A hot water storage vessel heated indirectly                                                |
| <b>cfu/l</b>              | Colony forming units per litre                                                              |
| <b>Dead leg</b>           | Pipework where water cannot flow, causing stagnation                                        |
| <b>Duty Holder</b>        | The employer or person in control of premises with legal responsibility for Legionella risk |
| <b>Responsible Person</b> | The person appointed by the Duty Holder to manage control day to day                        |
| <b>Sentinel outlet</b>    | The first and last outlets on a distribution circuit                                        |
| <b>TMV</b>                | Thermostatic mixing valve                                                                   |
| <b>Water Safety Group</b> | A multidisciplinary group overseeing water safety in healthcare premises                    |

| Term                     | Meaning                                                                          |
|--------------------------|----------------------------------------------------------------------------------|
| <b>Water Safety Plan</b> | A risk management plan for water systems, required in healthcare under HTM 04-01 |
| <b>Written scheme</b>    | The Duty Holder's documented plan for preventing or controlling Legionella risk  |

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