

Water Safety & Usage Group Minutes of meeting on Tuesday 25th June 2024 Via MS Teams

Attendees:

Dr Ciaran O'Gorman (CoG) George McCracken (GMcC)	Consultant Medical Microbiologist Head of Estates Risk & Environment	RGH MPH
Alan Metcalfe (AM)	Co-Director Estate Services	MPH
Joanna Dougherty (JD)	Estates Divisional Risk Manager	MPH
Nigel Keery (NK)	Head of Estates Operations	MPH
Samuel Hosick (SH)	Estates Decontamination Team	<u>MPH</u>
Kevin Lewis (KL)	Microbiology Doctor	RGH

Apologies:

Ingrid Traynor (IT)	Physiotherapy Services	MPH
Maureen Edwards (ME)	Director of Finance, Estates & Capital	RGH
	Development	
Alex Whittley (AW)	Estates Risk	MPH
Megan Hamilton (MH)	Estates Decontamination Team	MPH

In Attendance:

Minutes circulated to all attendees and those who were not present, as well as:

Belfast Health and Social Care Trust Meeting attendance table

Group members	Present at	Present at	Present at		
	meeting	meeting	meeting		
	held	held	held		
	26/09/23	30/01/24	25/06/24		
Maureen Edwards (RP)	Х	√	Х		
George McCracken (RP)	~	√	✓		
Brenda Creaney (RP)	X	X	X		
Dr Ciaran O'Gorman (RP)	✓	√	√		
Alan Metcalfe	✓	✓	✓		
Joanna Dougherty	✓	✓	✓		
Alex Whittley	✓	✓	X		
			√MP		
Justine Boyle	✓ KL	Х СоВ	XCoB		
Deirdre Winters/Ingrid Traynor	✓IT	Х	Х		
Megan Hamilton/Samuel Hosick	X	✓ MH/SH	√ SH		
Nigel Keery (NK)	Х	✓	✓		
Norah Noel (NN)	Х	Х	Х		
James Inglis (JI)	Х	Х	Х		

RP – Responsible Person

<u>ltem</u>		<u>Action</u>
1.0 1.1	Apologies As noted above.	NOTE
2.0	Previous Minutes All agreed – no amendments.	NOTE
3.0	1. Elliot Dynes future use (Point 4.3.6 from previous minutes) — discussed the various types of treatment which is being provided on this ward and queried whether it should be designated an augmented care area. CoG and GMcC said this recommendation will need to go through the ACG and they will draft an email to Bronagh Shaw to seek clarification on the issue.	GMcC/CoG
4.0	Service Group/Sub-group Reports - Reporting period 1 st January to 30 th April 2024	
4.1	presented the Estates report, outlining all sampling that has taken place as per Estates water procedural arrangements. Attention is drawn to the summary information on page 3 (point 2). Points of note are as follows; 1. Works to replace the main soil stacks in BCH Tower building have been completed, with work to some subsidiary drainage pipe work in various wards ongoing. 2. The Trust must continue to be cognisant of the risk posed by unoccupied areas and under-used outlets across the entire	NOTE
	 Trust estate. Estates Services must be informed to ensure necessary flushing regimes are in place. Work to improve the domestic hot and cold-water infrastructure in RBHSC is nearing completion. Water sampling continues with necessary remediation carried out. 'As fitted' drawings have been produced and are currently being verified. A water risk assessment has been undertaken and the team are working closely with the on-site Estates Officers and contractors to address any remaining remedial works. 	
	 Investigations continue into legionella positives in RBHSC. Removal of outlets (WHB's, showers and baths) which are infrequently used is being investigated. This work is coupled with the review of current chemical treatment methods. A new, independent water main has been installed for the Renal Pod in RBHSC, awaiting connection by NIW. A project to replace existing Steri-spray UV technology (taps and showers) continues as parts etc. become increasing difficult to source. 	



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7.	. The programme of works to remove redundant and upgrade
	existing wash hand basins to improve water movement
	throughout the RVH Immunology Day Centre in Elliot Dynes
	nears completion. Other works to enhance ward appearance
	have also been undertaken.
8.	. Works to remove redundant outlets within RABIU at MPH, to

- improve water movement and quality are complete.
- 9. A review of clinical wash hand basins, taps and respective IPS panel continues across the Trust, to ensure correct installation.

/AW

10. Works to upgrade outlets (wash hand basins, showers etc) throughout Withers Wards at Musgrave Park Hospital to improve water quality and movement continues.

/AW

11. The removal of infrequently used showers and outlets around the pool area in Mitre MPH to improve water quality and movement has been agreed with physiotherapy staff. Work will commence in the coming weeks.

/AW

12. A review of chemical treatment methods with the view to maintaining quality domestic water systems is ongoing.

/AW

- 13. Given the positive feedback, water safety training/information sessions delivered by the risk team, have been added to the staff induction process in NICU.
- 14. Rooms for patient relatives and RICU staff (Doctors) on Level 4 of RVH CCB are included in the RICU sampling schedule.
- 15. Water sampling (pseudomonas) has commenced and is ongoing in the New Maternity Building at RVH. Impact of this on the existing Trust wide sampling programme is being kept under review.

NOTE

4.2 **Augmented Care Group**

provided an update from the Augmented Care Group meeting.

Points of note are as follows:

1. Several service areas reported ongoing review of remedial works being carried out due to detection of legionella/ pseudomonas from outlets (PICU, NICU, BCH 6N, CSICU). NICU: The Water Reduced Neonatal Unit (WRNU) Task and Finish Group have considered several options for review; the sub-group have devised risk assessments against each option. No quorum for the Task and Finish Group on two occasions to agree on the risk rating of the risk assessments.

NOTE

3. Installation of self-flushing taps commencing within RVH Level 3 Dialysis Unit.



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	Reminder to all areas to undertake their Annual MDT Pseudomonas Risk Assessments.	
4.3	provided an update and report for Renal services. The main points are as follows; 1. Microbiological testing on all central water plant units (CWPs) across the Trust returned 106 samples with 1 failure. All retests returned within acceptable limits. 2. Chemical/trace metal analysis testing on all CWPs will be carried out soon. 3. All 21 portable WROs were tested during this period with 106 samples returning 3 failures. Corrective action was taken and all re-tests returned within acceptable limits. 4. The total chlorine in the raw water supplies to the Trust dialysis areas during the reporting period was on average approx. 0.4 ppm. 5. Currently all pre-treatment water plants in the Trust are working well with no issues to report. 6. Proposal by Trust Estates Department to change from using chlorine dioxide to using monochloramine for disinfecting the water supply to the hospital wards. This will have implications for dialysis areas throughout the Trust with regards to removal from the supply water and testing for same. The current setup for chlorine removal both in the 3 permanent dialysis areas supplied by the CWPs and the temporary dialysis areas supplied by the portable WRO300Hs will need to be checked to ensure they are suitable for removing the monochloramine.	NOTE
4.4	 Physiotherapy There was no representative from Physiotherapy at this meeting however IT provided an update and report prior to the meeting; All chemistry imbalances (see spreadsheet) across the 3 sites (MPH, RVH Level 3 and RBHSC) were attended to and managed by Estates in a prompt manner. RBHSC, one unsatisfactory water sample aerobic and pseudomonas (6th March), resulting in pool closure – supply of chlorine was affected earlier in the week. This was rectified within the same week. From 25th April 2024, Mitre Rehabilitation Unit pool closed 	NOTE
	due to suspected leak in pipe structure. Investigation and repair work ongoing.	

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	December 11430	
4.5	Decontamination Services MP reported for Decontamination, main points are as follows;	NOTE
	 Planned contingency was invoked to permit remedial RO pump works and replacement of cold RO element on 29th March. Full RO shut down and 72 hr water samples were taken as advised by consultant microbiologist. RO and final rinse water TVC results were satisfactory as per HTM 01-06 guidance and normal service resumed. Mycobacteria level detected in interim results (day 21 count) from EWD 302-012 Right Hand Side bath from quarterly test in May. Sample has been sent for Maldi Tof to identify the strain. EWD has been placed out of action. Micron filter replaced with thermal sanitisations completed prior to resampling. Once Maldi Tof results are received, a meeting with consultant microbiologist will be arrange to discuss next steps. MPH CDU - RO membranes and element within cold RO tank need replaced –suitable shutdown period required for approx. 7 days pending successful water results – date to be arranged. 	
	SH enquired if the Trust has access to the services of a Clinical Chemist. GMcC commented that a clinical chemist was part of the original WSUG in 2010 but had not been replaced once the person retired.	NOTE
4.6	PCSS provided an update for PCSS and provided a report. The main points are as follows;	NOTE
	 Regular, consistent cleaning is carried out in line with well-established work schedules to ensure that Support Services are compliant with cleaning standards and flushing protocols. The Augmented Care list of Tier 1 and Tier 2 locations has been forwarded on the PCSS team's page as a reminder to the management teams. 	
	3. Staff who work in the Augmented Care locations in all areas across the BHSCT have received induction training, which demonstrates the correct cleaning techniques in line with the agreed cleaning protocols in relation to flushing, sink cleaning, shower cleaning, baths, sluice sinks, sluice hoppers and ice machines. Training records are kept locally and are available for inspection.	
	4. All water outlets are flushed for 2 minutes prior to cleaning in line with the current protocol in place.5. Summer relief staff all receive induction and water safety training	



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5.0	Independent Review	
5.1	was not in attendance at this meeting and will update the group during the next meeting. GMcC provided a brief update as follows:	
	 Work is ongoing with the Estates Risk team to identify gaps in the current water design guide, based on the issue of recent revised British Standards and the work of the New Hospital Programme water safety group. An update on progress is to be provided at the next meeting. was currently chairing a group producing a technical bulletin to update HTM 04 01 in response to the coroner's findings from the Papworth outbreak of M.abscessus which resulted in 2 deaths and multiple cases in lung transplant units. The revised document will be published in 6-8 weeks. 	
6.0	Capitals Projects (Update) There was no representation from Capital Development at the meeting.	
6.1	New Maternity Hospital - all water testing has been undertaken (approx. 2000 Pseudomonas samples taken between 29 th April and 15 th June). It is understood that this building is currently not safe for patient/staff use and substantial remedial works will need to take place. Options are currently being considered to remedy the situation, which will require presentation to the WSUG.	NOTE
6.2	New Children's Hospital – GMcC expressed concerns relating to the construction of the new children's hospital, as the design of the water system is the same as NMH. JD will draft an email for forwarding to ME on behalf of the group.	JD
7.0	Standing Items	
(a)	Items to be included in Organisational Governance Steering Group Report Nothing to report.	
(b)	Terms of Reference/Composition of Group JD is reviewing TOR of the group.	JD
(c)	Changes in Service Provision Following changes in ward/department locations and Encompass, the occupancy checklist is to be shared with all wards/departments.	GMcC/ D.Horisk
(d)	Legislation/Guidance Changes GMcC confirmed there is a new addendum in progress for HTM04-01 Safe water in Healthcare Premises.	
(e)	Training GMcC reported he is part of a group [NHP] looking at developing a water hygiene course aimed at microbiologists, engineers and	GMcC

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	architects on how the design and management of a building's	
	water system directly impacts on patient safety.	
(f)	Changes to Service Group Procedural and/or Structural Arrangements	
	Nothing to report.	
8.0	AOB	
8.1	Augmented Care Pseudomonas Risk Assessments – it has been discussed that these are currently out of date for the majority of augmented care areas. JD will draft an email for to forward to all relevant ward managers as a reminder to review. It is the responsibility of ward managers to arrange the reviews for their ward, and invite all members of the MDT to attend ie IPC, Estates, PCSS, Consultant Microbiologist, etc. Also included in 4.2	JD/
8.2	BCH Tower monochloramine installation — discussed the possibility of any remaining dialysis points on levels 9, 10 and 11. will engage with the contractor to ensure there are no points left prior to the monochloramine system being installed.	/AW
9.0	Date of next meeting The next meeting will take place on Tuesday 24th September 2024.	