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Code: IC21
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Mechanical Ventilation Policy

Lead executive	Director of Infection Prevention and Control
Authors details	Operational Estates Manager

Type of document	Policy
Target audience	All CWP staff
Document purpose	<p>The aim of this policy is to provide staff and contractors with the standards required for the supply, installation and maintenance of all Mechanical Ventilation systems within Trust properties.</p> <p>To provide and maintain safe and healthy working conditions, equipment and systems of work for all staff, patients and visitors and to provide such resources, information, training and supervision as they need for this purpose. The Trust aims to do all that is reasonably practicable to manage ventilation systems and to follow the steps laid out in this policy to ensure the safety and wellbeing of patients and staff.</p>

Approving meeting	Infrastructure Sub-Committee Infection Prevention and Control Sub-Committee	Date 06-Nov-20
Implementation date	06-Nov-20	

CWP documents to be read in conjunction with	
HR6	Mandatory Employee Learning (MEL) Policy
IC10	Prevention and management of exposure to health care associated infections (HCAI) and inoculation incidents
IC17	The control and prevention of Legionellae and safe water services

Document change history	
What is different?	New document created, full review of the document undertaken
Appendices / electronic forms	N/A
What is the impact of change?	N/A

Training requirements	No - Training requirements for this policy are in accordance with the CWP Training Needs Analysis (TNA) with Education CWP.
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Document consultation	
Clinical Services	Via discussion board
Corporate services	Via discussion board
External agencies	Who within this service have you spoken to

Financial resource implications	None
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External references
1. Health and Safety at Work etc. Act 1974
2. Health Act 2006
3. Medicines Act 1968
4. Control of Substances Hazardous to Health 2002
5. Regulatory Reform Order 2005
6. HSG258 Guide to LEV, Controlling Airborne Contaminants at Work. 2011
7. Health and Social Care Act 2015
8. Workplace Health, Safety and Welfare Regulations 1992. Second Edition 2013.
9. The Management of Health and Safety at work Regulations 1999
10. The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2012
11. Provision and Use of Work Equipment Regulations 1998
12. Health and Safety (Safety Signs and Signals) Regulations 1996
13. Health Technical Memorandum 03 (Ventilation Services)

Equality Impact Assessment (EIA) - Initial assessment	Yes/No	Comments
Does this document affect one group less or more favourably than another on the basis of:		
- Race	No	
- Ethnic origins (including gypsies and travellers)	No	
- Nationality	No	
- Gender	No	
- Culture	No	
- Religion or belief	No	
- Sexual orientation including lesbian, gay and bisexual people	No	
- Age	No	
- Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
Is there any evidence that some groups are affected differently?	No	
If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable? N/A		
Is the impact of the document likely to be negative?	No	
- If so can the impact be avoided?	N/A	
- What alternatives are there to achieving the document without the impact?	N/A	
- Can we reduce the impact by taking different action?	N/A	
Where an adverse or negative impact on equality group(s) has been identified during the initial screening process a full EIA assessment should be conducted.		
If you have identified a potential discriminatory impact of this procedural document, please refer it to the human resource department together with any suggestions as to the action required to avoid / reduce this impact. For advice in respect of answering the above questions, please contact the human resource department.		
Was a full impact assessment required?	No	
What is the level of impact?	Low	

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1. Introduction

The Trust, accepts its responsibility under the Health and Safety at Work etc. Act 1974 (HSAWA), the Management of Health and Safety at Work Regulations 1999 (MHSW).

Control of Substances Hazardous to Health (COSHH), Building Regulations, HSG258 Guide to LEV, Controlling Airborne Contaminants at Work 2011, Health and Social Care Act, Medicines Act 1968, Provision and Use of Work Equipment Regulations (PUWER), Workplace Health, Safety and Welfare Regulations 1992 Second Edition 2013. All place a duty on Cheshire and Wirral Partnership NHS Foundation Trust (CWP) to publish issue and implement a ventilation policy, which outlines the organisation and procedures required to achieve the objectives set out in those legislative documents.

The Trust recognises that the lowest acceptable standards of air quality are contained in legislation and it is the aim of the Trust, as an organisation committed to quality performance, to improve upon these standards. The aim of this policy is to provide staff and contractors with the standards required for the supply, installation and maintenance of all Mechanical Ventilation systems within Trust properties.

2. Who does this policy apply to?

This Policy applies to all Trust premises whether owned or occupied by the Trust under lease or other Service Level Agreements (SLAs) and Private Finance Initiatives (PFI). Where the management of buildings/areas occupied by Trust staff and/or patients is carried-out by others, the requirements of this Policy remain applicable although implementation of the site specific Risk Management requirements is managed by local Policies. It remains; therefore, the Trust's responsibility by the Estates Governance Manager and Facilities and Capital Development Manager, to ensure that the requirements of this Policy are notified to and complied with by all other parties described above

3. Definitions

HSAWA	Health and Safety at Work etc. Act 1974
MHSWR	Management of Health and Safety at Work Regulations 1999
IPC	Infection Prevention Control
HCAI	Health Care Acquired Infections
DP (V)	Designated Person (Ventilation)
RP	Responsible Person (Ventilation) RP
AP (V)	Authorised Person (Ventilation)
AE (V)	Authorising Engineer (Ventilation)
AHU	Air Handling Unit
PPM	Planned Preventative Maintenance
LEV	Local Exhaust Ventilation
WSG	Water Safety Group

4. Duties and responsibilities

4.1 Chief Executive (Duty Holder)

The Chief Executive has overall responsibility for ensuring that the Trust's premises comply with all statutory requirements and also has an overriding duty of care as the duty holder under the HSAWA.

This responsibility is delegated to the Head of Estates within the Trust. To help with such responsibility, the Authorised Person will help with the day-to-day management and control of the ventilation policy.

4.2 Designated Person

The Associate Director of Operations is the Designated Person (HVAC). They are appointed in writing by the Duty Holder.

The Designated Person provides the essential senior management link between the organisation and professional support. The Designated Person should also provide an informed position at Board level.

They are responsible for the Trust arrangements (strategic leadership, direction and overview) which will ensure that compliance with standards is achieved, including proposed developments taking into account of impact on air quality. Any management issues, including HVAC issues, that have been reported to Board having being resourced and solved. They won't have technical or operational duties but will be supported in the role by a Trust WSG that delivers governance, assurance and compliance.

4.3 Senior Operational Manager – Head of Estates

The Head of Estates is classed as the nominated Responsible Person and will provide a link with the Trust Board and the Quality and the Infrastructure Sub Committee to ensure that appropriate management systems are put into place to address ventilation issues and ensure compliance with legislation within the Trust.

They will oversee the management arrangements and advise the Trust Board accordingly and ensure that the Trust's risk register is maintained with regard to ventilation management. They will appoint in writing an Authorising Engineer to implement, administer and monitor the safety arrangements for the systems installed at the Trust.

They will review the appointment of the Authorising Engineer on an annual basis. Where appropriate, they will seek advice from the Authorised Person, Infection Prevention Control and the Non Clinical Risk Advisor to ensure the Trust meets its statutory obligations for the control and management arrangements for ventilation safety.

They will agree any deviation from HTM 03-01 Part A and B and other current requirements as detailed in this policy.

They will ensure that sufficient resources are made available to the Estates and Facilities Department to comply with their duties outlined in this policy.

4.4 Authorising Engineer

The Authorising Engineer will be an independent appointee to the Trust, reporting directly to the Designated Person. They will hold Authorising Engineer qualifications in line with HTM 03-01 Part A and B.

They will be responsible for implementing, administering and monitoring the implementation of HTM 03-01 Part A and B.

They will assess and recommend, in writing, an appropriate number of Authorised Persons.

They will define the exact area of responsibility for each Authorised person, and may remove an Authorised Person from their post if appropriate.

They will audit compliance of the Trust against HTM 03-01 Part A and B and produce an Action Plan for completion by the Trust, and review progress of the Action Plan.

They will notify the Department of Health of any known operational restriction issued.
They will Co-ordinate the investigation of serious incidents relating to the ventilation systems.

4.5 Authorised Persons

Will have a letter of Authorisation explaining responsibilities from the Authorising Engineer which is time bound. There can be more than one Authorised Person for an area, but only one can be on duty at any time. Transfer of responsibility must be recorded;

They will follow the duties and responsibilities laid down in HTM 03-01 Part A and B.
They must appoint Competent Persons, who possess the necessary technical knowledge, skill and experience relevant to the nature of the work to be undertaken, which is able to prevent danger.
They ensure the following:

- Maintain a register of all Competent Persons for work on ventilation systems.
- Define the extent of the systems for which competent persons are responsible.
- Ensure that there are suitable and sufficient risk assessments and safe systems of work in place for all ventilation procedures and tasks.
- Ensure that remedial action is taken, as required, when items of equipment are found and/or reported to be defective.
- Ensure all staff, under his/her control, receives appropriate training in relation to the duties they are required to undertake.
- Ensure that prior to carrying out programmed maintenance which may affect the running of the ventilation system(s), the ward/department manager is informed to ensure clinical activity is not adversely affected.

4.6 Competent Person

A Competent Person is approved and appointed in writing by an Authorised Person for defined work, possessing the necessary technical knowledge, skill and experience relevant to the nature of the work to be undertaken who is able to accept a permit-to-work from an Authorised Person.

4.7 Infection Prevention Control

It is the responsibility of the Infection Control Team (ICT) to provide input for all matters relating to the hospital environment, maintenance of hospital buildings and engineering systems and to work with the Estates Team including:

5. Main Policy Content

The Trust is committed to the safe and efficient operation of all the ventilation systems for which it has a responsibility in line with all current guidance's identified in this policy.

The Trust will adhere to the testing and verification of equipment to help promote a safe working environment for all persons who come into contact with the Trust and its facilities.

The Trust reviews procedures for health and safety matters. Identification of hazards and elimination of risks shall also take account of the ventilation systems, with the safety codes guidance and HTM 03-01 Part A and B to ensure compliance with statutory legislation.

The effectiveness of the ventilation policy and procedures detailed in relevant guidance depends mainly on the Estate Services Department to actively assess and maintain the systems at the Trust.

Suitable and sufficient risk assessments and safe systems of work will be undertaken by management.

Management will ensure that employees are competent to undertake tasks involving ventilation maintenance.

Management will ensure correct safety signs are provided to ensure compliance with legislation.

6. Training requirements

It is essential that personnel at all levels have a sound general knowledge of the principles, design, operation and maintenance of air handling and ventilation systems. They should be trained on those specific systems for which they will be responsible and which they will be expected to use.

The training of an individual, which can be by formal education and by on-the-job tuition, as appropriate, is to be assessed for suitability by the person responsible for the appointment of the individual to a particular duty.

Records of all training activities are to be held in the operational procedures manual for each particular system. This will include the records of each individual who has received the necessary training appropriate to the duties to be undertaken.

- Provide education for maintenance staff and management of Infection Control and reduction in HCAI's ([IC10 - Prevention and management of exposure to health care associated infections and inoculation incidents](#))
- Provide guidance and support when advice for controlling the environment is required
- Provide advice on risk assessments for controlling the environment decisions
- Identify priorities for action

7. Competence

It is essential that personnel at all levels have a sound general knowledge of the principles, design, operation and maintenance of air handling and ventilation systems. They should be trained on those specific systems for which they will be responsible and which they will be expected to use.

The training of an individual, which can be by formal education and by on-the-job tuition, as appropriate, is to be assessed for suitability by the person responsible for the appointment of the individual to a particular duty.

Records of all training activities are to be held in the operational procedures manual for each particular system. This will include the records of each individual who has received the necessary training appropriate to the duties to be undertaken.

8. Drawings

It is the responsibility of the Authorised Person to ensure the ventilation drawings up to date and ensure that all drawings and supplier information is handed over with every project.

9. Incident Reporting

Any incident which involves the ventilation systems and which compromises safety, must be reported on Datix and to the Estate Services Department, who will inform the Authorised Person for the system, and who, in turn will determine what action is to be taken to prevent any risk or danger arising from the reported equipment.

All reported incidents are to be investigated by the Authorised Person and recorded on a Trust incident/accident system.

The reporting of injuries or dangerous occurrences, under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2012 (RIDDOR) will be acted upon as required by the Health and Safety Department.

10. Monitoring compliance

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements
Annual inspection of plant equipment and duct work	Authorised Person	Visual inspection and written report	Annual	Quarterly to the Infrastructure Sub Committee

The responsibility for monitoring specific aspects is delegated to the appropriate key personnel. It is the duty of the AP (V) for the Trust to update the policy with respect to any of the changes outlined below, and notifies all personnel involved with air handling and ventilation systems.

The policy is monitored via the Infection Prevention and Control Committee where quarterly reports will be submitted to monitor compliance of this policy.

The monitoring of the Policy will also be through the Datix reporting system where any untoward incidents occur, and subsequently through the Health & Safety Committee.

The AP (V) will carry out an annual policy audit.

Policy changes and updates will be communicated to the policy team for publishing to the public-facing CWP website and the staff intranet.

11. Policy review

This policy will be reviewed by the Estate department and ratified at the Infection Prevention and Control Sub Committee.

Appendix 1: Training Needs Analysis

Training Programme	Frequency	Course Length	Delivery Method	Facilitators	Recording Attendance	Strategic & Operational Responsibility
Directorate	Service		Target Audience			
MH/LD/TQ21	Adult Mental Health		N/A			
	Specialised Services		N/A			
	Learning Disabilities		N/A			
ISDs	Older Person's Mental Health		N/A			
	Adults		N/A			
	Children Services		N/A			
Corporate	Estates		Authorised Persons and Competent Persons training as per specified HTM03-01			