Drinking Water Safety Plan Template

for Specific Development (Hospitals)

 in Hong Kong



# Water Supplies Department

# Hong Kong Special Administrative Region Government

**June 2019**Explanatory Notes:

* 1. This template is prepared based on recommendations of the World Health Organization (WHO) with an aim to assisting the management staff of a hospital to develop and implement Water Safety Plan (WSP) to enhance water safety.[[1]](#footnote-1) It covers the essential elements of WSPs and common requirements applicable to plumbing layout of hospitals. The template comprises the following components:
* Introduction
* Part A – General Description of the Hospital
* Part B – Water Supply Flow Diagrams
* Part C – Risk Assessment Summary Table for the Hospital
* Part D – Routine Water Safety Checklist for the Hospital (Based on **Components** of Checking)
* Part E – Routine Water Safety Checklist for the Hospital (Based on **Persons** Responsible for Conducting Checking)
1. A Designated Person (DP) should be assigned to oversee the development and implementation of the WSP. DP can be a person familiar with the operations of the hospital, e.g. the staff-in-charge of estate management. DP should be supported by other administrative, maintenance or technical staff and/or infection-control officers to form a WSP team. If required, DP may seek technical advice from a Qualified Person (QP) (such as a Licensed Plumber (LP)) for the preparation and implementation of the WSP.[[2]](#footnote-2) DP may also refer to those established guidelines listed in the Reference when formulating the WSP.
2. DP should complete Parts A and B as far as possible with the support from the WSP team members. He/She should then review Part C and select those items applicable to the hospital. For instance, items related to wall-mounted dispensers are not relevant to a hospital without such dispensers. DP should similarly select relevant items in Part D and Part E[[3]](#footnote-3) to form a water safety checklist.
3. DP should then perform the general checking duties and engage QP to conduct specific checking according to the checklist.
4. Water testing is normally not required under WSP but, subject to the hospital’s operations, simple checking of disinfectant levels and hot water temperature at water outlets of the hospital is recommended to control biofilm formation in pipes. Please see Sections 4.16 – 4.18 of the Guidelines for Drinking Water Safety Plans for Buildings in Hong Kong and Parts C to E of this template for details.
5. DP should arrange an internal audit at least once every two years. The auditor can be an internal staff or independent party who is not involved in the implementation of WSP. Among other aspects, the auditor should check that (i) the WSP is up-to-date and generally accurate; (ii) conditions of the plumbing components tally with the checking records; (iii) staff are trained and competent to carry out the routine checking (e.g. how to check the strainers of taps and shower heads); and (iv) the documents and records are complete. Inspection of records and plumbing components by sampling should normally be sufficient.
6. DP should also arrange a periodic review at the same frequency for updating of the WSP as well as addressing the audit findings and other improvements, where applicable. Discussion over the WSP and follow-up actions in a scheduled staff meeting with records can serve the purpose.
7. The steps for the development and implementation of WSP for a hospital are summarised in the following figure.

**Assign a DP and supporting staff**

**to form the WSP team**

**DP formulates/updates WSP for the hospital by:**

**(i) completing Parts A and B; and**

**(ii) selecting relevant items from Parts C, D and E**

1. **Conduct general checking (DP) and specific checking (QP)**
2. **DP arranges for water testing (if required)**

**DP arranges for periodic review**

**DP seeks technical advice from QP if required**

**DP arranges for internal audit**

Reference

1. CDC (2017) *Developing a Water Management Program to Reduce Legionella Growth & Spread in Buildings A Practical Guide to Implementing Industry Standards*, USA

(<https://www.cdc.gov/legionella/wmp/toolkit/index.html>; accessed on 17 March 2019)

2. Department of Health (2016) *Health Technical Memorandum 04-01: Safe water in healthcare premises – Part B: Operational management,* UK

(<https://www.gov.uk/government/publications/hot-and-cold-water-supply-storage-and-distribution-systems-for-healthcare-premises>; accessed on 17 March 2019)

3. enHealth (2015) *Guidelines for Legionella control in the operation and maintenance of water distribution systems in health and aged care facilities*, Australian Government, Canberra

([https://www.health.gov.au/internet/main/publishing.nsf/content/A12B57E41EC9F326CA257BF0001F9E7D/$File/Guidelines-Legionella-control.pdf](https://www.health.gov.au/internet/main/publishing.nsf/content/A12B57E41EC9F326CA257BF0001F9E7D/%24File/Guidelines-Legionella-control.pdf); accessed on 17 March 2019)

4. Health and Safety Executive (2014) *Legionnaires’ disease Part 2: The control of legionella bacteria in hot and cold water systems*, UK

(<http://www.hse.gov.uk/pUbns/priced/hsg274part2.pdf>; accessed on 17 March 2019)

5. Prevention of Legionnaires’ Disease Committee (2016) *Code of Practice for Prevention of Legionnaires’ Disease (2016 Edition) (Incorporating Addendum No.01/2018)*, Hong Kong

(<https://www.emsd.gov.hk/filemanager/en/content_645/COP-PLD_2016_a0118_en.pdf>; accessed on 17 March 2019)

6. WHO (2011) *Water Safety in Buildings*

(<https://www.who.int/water_sanitation_health/publications/2011/9789241548106/en/>; accessed on 17 March 2019)

Water Safety Plan

for <Name of Hospital>

Insert a photograph of the hospital here

**<Month Year (of issuing)>**

##### Version No.: \_\_\_\_\_\_\_\_\_\_\_

Copy No.: \_\_\_\_\_\_\_\_\_\_\_

Holder: \_\_\_\_\_\_\_\_\_\_\_

Prepared by: \_\_\_\_\_\_\_\_\_\_\_ (Name)

 \_\_\_\_\_\_\_\_\_\_\_ (Post)

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**Introduction**

1. Water Safety Plan (WSP) was introduced by the World Health Organization (WHO) in 2004 as an effective means of consistently ensuring safety of drinking water supply through risk assessment and risk management.
2. Based on WHO’s recommendations, this plan contains the essential elements of WSP with a view to preventing contamination of drinking water in the inside service. The plan is composed of the following parts:
* Part A – General Description of the Hospital
* Part B – Water Supply Flow Diagrams
* Part C – Risk Assessment Summary Table for the Hospital
* Parts D and E – Routine Water Safety Checklist for the Hospital
1. Part A contains a brief description of the hospital’s characteristics including the Designated Person (DP) assigned to oversee the development and implementation of the WSP.
2. Part B contains the schematic diagrams indicating the essential plumbing components of the hospital.
3. Part C contains a summary of risk assessment on the hospital’s plumbing system.
4. Parts D and E are the routine water safety checklists summarising the checking duties undertaken by DP and Qualified Person (QP) based on the risk assessment.
5. DP performs the general checking duties and a QP is engaged to conduct specific checking according to the checklist.
6. DP arranges internal audits at least once every two years to verify effectiveness of the WSP.
7. The WSP is periodically reviewed at least once every two years.

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**Part A**

**General Description of the Hospital**

| **Item** | **Details** |
| --- | --- |
| **Date and version of WSP**  | Date:Version: |
| **Person responsible for this WSP (Designated Person)[[4]](#footnote-4)** | Name:Position: |
| **Contacts for DP** | Telephone:Email: |
| **Name of Hospital** |  |
| **Address of Hospital** |  |
| **Owner****(if applicable)** |  |
| **Management Agent** **(if applicable)**  |  |
| **Maintenance Agent** **(if applicable)** |  |
| **Lot Boundary (or Location Map)** |  |
| **No. of Blocks****(if applicable)** |  |
| **No. of Floors****(if applicable)** |  |
| **No. of Wards****(if applicable)** |  |
| **No. of the Patients and Staff** |  |
| **Water connection notification or certificate references****(if available)** |  |
| **Plumbing line diagrams ref. nos.** **(if available)[[5]](#footnote-5)** |  |
| **Types of water supply present on site****(cross out or add items as appropriate)** | 1. Potable water supply
2. Seawater flushing water supply
3. Air-conditioning cooling water supply (including cooling tower)
4. Fire service water supply
5. Roof-harvested rainwater
6. Process water (e.g. distilled or reverse-osmosis boiler water)
7. Recycled/reclaimed storm water or sewage
8. Other (please specify)
 |
| **Water Quality Testing** | 1. Routine testing of disinfectant level (if applicable)Testing period:Results: Please see attached records 2. Other test parameters (this may refer to a separate schedule):Last testing on:Test report ref.:Next testing scheduled: |
| **WSP audit** | Auditor (state whether internal or external and identify the auditor and their credentials):Last audit on:Audit report ref.:Next audit due on: |

**Part B**

**Water Supply Flow Diagrams** Note 1

**Based on as-built plumbing line diagrams ref. no. xxxx** (if applicable)

**(Illustrative Examples)**

1. Water supply flow diagram for the block

*Name of block (if applicable):*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Café/Canteen on G/F

Water Meter/

Non-return valve

1 -15/F

Central Water Heater/

Boiler Note 2

Master Water Meter/

Non-return valve

Sump Tank

& Pumps

Booster Pumps

Booster Pumps

Booster Pumps

6 – 10/F

Kitchen and Pantry on 1/F

G – 5/F

Pressure Reducer

11 – 15/F

Potable Water Tank

Dialysis Ward on 8/F

Dialysis Water Tank

Isolation Room Water Tank

WSD Main

Isolation Room on 7/F

Roof Tanks

2.Water supply flow diagram for individual floors or wards

*Name of block (if applicable):*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Central Water Heater/Boiler Note 2

Roof Tank

**Individual**

**Floors/Wards** Note 3

Gate valve

Gate valve

Cold water taps for treatment, drinking, cooking and washing Notes 4

Hot water taps for hand-washing, tubs and showers Note 5

Note 1 The hospital may describe the internal plumbing system in other appropriate formats to facilitate risk assessment.

Note 2 Please modify if decentralised water heaters for individual floors/wards are installed instead.

Note 3 If applicable, it is suggested that a list of taps and point-of-use (POU) devices be maintained for each floor/ward.

Note 4 Please state details such as “Water served for drinking on 1 – 10/F are filtered and boiled”, “All water for Isolation Room on 7/F is filtered”, etc.

Note 5 Please state details such as “Tubs and showers are installed on 3/F and 3 – 10/F, respectively”. Please state in particular if hot and cold water is mixed for warm water supply, e.g. “Thermostatic mixing valve is used at the Paediatric Ward on 3/F ”.

*Name of block (if applicable):*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part C**

**Risk Assessment Summary Table for the Hospital**a

| **Hazards (chemical, microbial or physical contaminant) / Hazardous Events (causes of excessive levels of, or exposure to, hazards)** | **Likelihood** | **Consequence** | **Risk** | **Recommended Control Measures** | **Recommended Monitoring Procedures** |
| --- | --- | --- | --- | --- | --- |
| 1. Stagnation of water leading to stale water with possible slime or biofilm formation.

This situation could cause unpleasant tastes or odours leading to users’ complaints or reluctance to use the water.  | Likely | Minor | Moderate | 1. Minimise dead-legs in plumbing system
2. Respond to the patient or staff’s complaints on water quality
3. Remind staff to flush idle or infrequently-used taps
4. Flushing before first occupancy and after major plumbing works as well as after prolonged periods of non-use
5. Install backflow prevention devices to prevent backflow of water from known dead-legs into the main water supply system where applicable
6. Properly operate and maintain the hot and cold water systems to prevent Legionnaires’ disease
7. Maintain residual free chlorine or other disinfectants within the internal plumbing system
 | 1. Construct plumbing system following WSD’s instructions and arrange for submissions and inspection as required. (By DP and LP)
2. Review and set up flushing programme with LP and conduct flushing of:
	1. known dead-legs (if present)
	2. idle or infrequently-used taps (if present)
	3. prior to first occupancy after building construction or plumbing modification
	4. in response to the patient or staff’s notification of problems.

(By DP)1. Inspect and maintain backflow prevention devices. (By LP)
2. Regular inspection and maintenance of hot water devices (e.g. central heat exchanger or storage type water heaters) and operate the devices at 60°C or above (where applicable) (**Caution**: To prevent accidental scalding, the hot water temperature at the tap outlets to be used by patients with decreased self-caring ability such as paediatric patients should not be higher than 43°C). (By DP)
3. Regularly inspect strainers in water taps and shower heads for excessive buildup of deposits or scales. Arrange cleaning and replacement if required. (where applicable). (By DP)
4. For each floor/ward identify as far as practicable cold water “sentinel taps”, i.e. those cold water taps supplying water for drinking, food-preparation, ice-making, washing, tubs, showering, etc. which are available for regular measurements and have the lowest residual disinfectant levels due to plumbing layout or frequency of use. Regularly conduct flushing and measure disinfectant levels of those sentinel taps. (By DP)
5. Also identify as far as practicable hot water “sentinel taps” for each floor/ward which are available for regular measurements and have the lowest temperature due to plumbing layout. Regularly check the hot water temperature. (By DP)
 |
| 1. Storing and supplying water at temperatures in the range 20°C to 46°C that are favourable to the growth of opportunistic pathogens (including, but not limited to, legionellae).

These pathogens could potentially cause infections and serious illnesses, including Legionnaires’ disease to which immunocompromised people are more susceptible.  | Rare | Major | Low |
| 1. Excessive leaching of hazardous metals (e.g. lead, copper, cadmium, chromium, antimony, nickel, or iron from metal pipes or plasticisers from plastic pipes) from inappropriate plumbing materials or due to long stagnation of water.

This may cause metallic tastes, discoloured water or stained washing and fittings (blue from copper, brown from iron), or even adverse health effects after prolonged exposure.  | Likely | Moderate | High | 1. Construct plumbing system and carry out repairs or plumbing modifications in accordance with WSD’s instructions
2. Use plumbing materials approved by WSD for all new plumbing works and repair or replacement of plumbing
3. Remind staff to flush idle or infrequently-used taps
4. Flushing before first occupancy and after major plumbing works as well as after prolonged periods of non-use
5. Install backflow prevention devices to prevent backflow of contaminated water into the main water supply system where applicable
 | 1. Engage LP to construct plumbing system and carry out plumbing works and arrange for submissions and inspection according to WSD’s instructions. (By DP)
2. Review and set up flushing programme with LP and conduct flushing of:
	1. known dead-legs (if present)
	2. idle or infrequently-used taps (if present)
	3. prior to first occupancy after building construction or plumbing modification
	4. in response to the patient or staff’s notification of problems

(By DP)1. Inspect and maintain backflow prevention devices (By LP)
 |
| 1. Transfer of hazardous organics (e.g. petrochemicals or paint strippers) through plastic pipes due to use of inappropriate plumbing materials. This commonly results from, for instance, polyethylene pipes being laid in ground that is, or becomes, contaminated by fuel spills or spillage of other organic chemicals.

This may cause petrochemical tastes or even adverse health effects after prolonged exposure.  | Likely | Moderate | High |
| 1. Cross-connection between potable and non-potable water supplies leading to possible contaminants from the non-potable water causing unpleasant taste (e.g. saltiness), odours or hazardous substances (e.g. pathogens from non-potable water) to enter the potable water system.

The problem can arise due to drinking taps being connected to the wrong water pipe or due to the potable and non-potable water pipes being inter-connected without authorisation.This can cause tastes or odours that water users find unpleasant and that may in turn make water users feel unwell or could even cause illness due to hazardous substances (pathogenic microorganisms or chemicals) being present in the water.  | Rare | Major | Low | 1. Carry out plumbing works according to WSD’s instructions and avoid cross-connection in plumbing system
2. If feasible, set pump pressure and roof tank levels so that the potable water is at higher pressure than all non-potable water (typically with the potable water system being at least 5 m or 50 kPa above the non-potable water system pressure)
3. Retain as-built drawings and plumbing diagrams for all plumbing works and plumbing modifications following completion of works as far as practicable
4. Install backflow prevention devices to prevent backflow of non-potable water into the potable water supply system
5. Clearly differentiate potable and non-potable water pipes using labels and colour as far as practicable
6. Ensure potable water taps are not connected to the non-potable water system (if present)
 | 1. Engage LP to carry out plumbing works and arrange for submissions and inspection according to WSD’s instructions. (By DP)
2. Set and check set points for pump pressure, roof tank level and pressure reducing valve. (By LP)
3. Inspect and maintain water pumps. (By DP and LP)
4. Regular inspection of roof tank levels. (By DP)
5. Check if as-built plumbing drawings have been updated following plumbing works. (By DP)
6. Inspect and maintain backflow prevention devices. (By LP)
7. Check if potable and non-potable pipes have been marked with different labels. (By DP and LP)
8. Check if labels on potable and non-potable water pipes are intact (where applicable). (By DP)
9. Conduct flow tests after construction or modifications of plumbing system to demonstrate that potable water are not connected to the non-potable water system (where applicable). (By DP and LP)
 |
| 1. Ingress of contaminants due to pipe breaks, leakages or plumbing modifications and loss of water pressure leading to possible contaminants causing unpleasant taste, odours or hazardous substances to enter the potable water system.

The problem can arise if there is a leak in the potable water system that whilst it would normally cause water to flow out could equally allow contaminated water to flow in if the pressure in the pipe is lost or low. This can cause tastes or odours that water users find unpleasant and that may in turn make water users feel unwell or could even cause illness due to hazardous substances (pathogenic microorganisms or chemicals) being present in the water.  | Rare | Major | Low | 1. Construct plumbing system and carry out plumbing modifications in accordance with WSD’s instructions
2. Maintain sufficient water pressure
3. Flush pipes and fittings to bring in clean water and flush out any possible contamination that may have entered via leaks following loss of water pressure
4. Repair and replace leaking pipes, joints or fittings
 | 1. Engage LP to construct plumbing system or carry out plumbing modifications according to WSD’s instructions. (By DP)
2. Set and check set points for pump pressure, roof tank level and pressure reducing valve. (By LP)
3. Inspect and maintain water pumps. (By DP and LP)
4. Inspection of roof tank levels. (By DP)
5. Ensure sufficient flushing after plumbing modifications or loss of water pressure. (By DP and LP)
6. Inspection of inside service for leaks. (By DP)
 |
| 1. Backflow of hazardous substance into potable water system leading to possible contaminants causing unpleasant taste, odours or hazardous substances to enter the potable water system.

The problem can arise whenever the potable water system is physically connected to, for instance, point-of-use (POU) devices requiring chemical cleansing or a container of chemicals, particularly if the hazardous liquid is pressurised and pushes the hazardous chemical back into the water supply, or if the water supply loses pressure and sucks the hazardous chemical into the water supply. This can cause tastes or odours that water users find unpleasant and that may in turn make water users feel unwell or could even cause illness due to hazardous substances (pathogenic microorganisms or chemicals) being present in the water.  | Rare | Major | Low | 1. Construct plumbing system in accordance with WSD’s instructions
2. Maintain sufficient water pressure
3. Install backflow prevention devices between the water supply plumbing and any possible connection to any potentially hazardous liquid to prevent backflow of contaminated water into the potable water supply system where applicable
 | 1. Engage LP to construct plumbing system or carry out plumbing modifications and arrange for submissions and inspection according to WSD’s instructions. (By DP)
2. Set and check set points for pump pressure, roof tank level and pressure reducing valve. (By LP)
3. Inspect and maintain water pumps. (By DP and LP)
4. Regular inspection of roof tank levels. (By DP)
5. Inspect and maintain backflow prevention devices. (By LP)
 |
| 1. Entry of hazardous substance into potable water storage tanks (sump tank or roof tank) leading to possible unpleasant tastes, odours or hazardous substances present in the potable water system.

The problem can arise due to deliberate contamination of the water tank or due to birds, animals or insects getting into the water tank. Water accumulation on the tank roof may also lead to seeping or overflowing of contaminated water into the water tank.This can cause tastes or odours that water users find unpleasant and that may in turn make water users feel unwell or could even cause illness due to hazardous substances (pathogenic microorganisms or chemicals) being present in the water. | Rare | Catastrophic | Low | 1. Ensure proper design, construction and maintenance of water storages such as roof or sump tanks
2. Keep sump and roof tank room (if available) locked
3. Keep sump and roof tank access hatch locked and secure
4. Prevent entry of insects or small animals into the water tanks by sealing all holes and protecting any vents and overflow pipes using gnaw-proof mesh
5. Ensure cleanliness of sump or roof tanks e.g. through DP inspecting and arranging cleansing of sump/roof tank as required
6. Ensure no water accumulation on tank roof
 | 1. Engage LP to construct storage tanks and arrange for submissions and inspection according to WSD’s instructions. (By DP)
2. Inspect sump and roof tank rooms (if available) and tank covers. (By DP)
3. Inspect air vents and overflow pipes of sump and roof tanks (By DP)
4. Inspect sump and roof tank interiors. (By DP)
5. Arrange for regular cleansing of sump and roof tanks in accordance with WSD’s instructions. (By DP)
6. Inspect tank roof for water accumulation and whether rain water drains are free from blockage. (By DP)
 |
| 1. Inappropriate alterations or repairs to plumbing by persons not authorised, licensed or trained to make such alterations or repairs. This can lead to contamination of the water supply through a range of pathways.

Use of the wrong plumbing materials could result in hazardous chemicals (such as lead) being present in the water. Cross-connections could arise resulting in potable water taps supplying non-potable water. Connections could be made between potable water and hazardous liquids without the required backflow prevention systems being in place, which could result in hazardous chemicals being forced at pressure, or sucked in via backflow, into the water supply. This can cause tastes or odours that water users find unpleasant and that may in turn make water users feel unwell or could even cause illness due to hazardous substances (pathogenic microorganisms or chemicals) being present in the water. | Likely | Moderate | High | 1. Carry out plumbing modifications in accordance with WSD’s instructions
2. Use plumbing materials approved by WSD for all new buildings, new plumbing works and repair or replacement of plumbing
3. Install backflow prevention devices between the water supply plumbing and any possible connection to any potentially hazardous liquid to prevent backflow of contaminated water into the potable water supply system where applicable
4. Clearly differentiate potable and non-potable water pipes using labels and colour as far as practicable
5. Provide advice to staff about the importance of not carrying out inappropriate alterations to plumbing
 | 1. Engage LP to construct plumbing system or carry out repairs or plumbing modifications and arrange for submissions and inspection according to WSD’s instructions. Maintain copies of the submitted documents. (By DP)
2. Inspect and maintain backflow prevention devices. (By LP)
3. Check if potable and non-potable pipes have been marked with different labels. (By DP and LP)
4. Check if labels on potable and non-potable water pipes are intact (where applicable). (By DP)
 |
| 1. Contamination of drinking water due to inappropriate installation, operation or maintenance of point-of-use (POU) devices fitted to drinking taps.

The problem can arise if the POU devices such as reverse osmosis equipment, water filters or wall-mounted dispensers are not properly installed, operated or maintained, e.g. use of inappropriate filters, wall-mounted dispensers or plumbing materials, leakages, water stagnant in wall-mounted dispensers and the inlet pipes for prolonged periods, overloading of filter cartridges leading to breakthrough, backflow of substances accumulated in filter cartridges into water supply during low or loss of water pressure, etc.This can cause tastes or odours that water users find unpleasant and that may in turn make water users feel unwell or could even cause illness due to hazardous substances (pathogenic microorganisms or chemicals) being present in the water. | Rare | Major | Low | 1. Ensure selection and proper installation of appropriate model of POU devices
2. Ensure POU devices are properly operated and maintained
3. Regularly flush wall-mounted dispensers and the inlet pipes according to the drinking habits, e.g. conduct flushing before breakfast if the wall-mounted dispenser is idle after dinner until morning
 | 1. Consult qualified persons for selection of POU devices, e.g. appropriately certified products. (By DP)
2. Engage LP or other appropriate qualified persons to install POU devices according to manufacturer’s product instructions and WSD’s plumbing instructions. (By DP)
3. Operate, inspect and maintain POU devices, including change of cartridges according to manufacturer’s instructions. (By DP)
4. Review and set up flushing programme for wall-mounted dispensers and inlet pipes according to the drinking habits to effect regular flushing. (By DP)
 |

Note:

a (i) A directory of approved plumbing components is available via: <http://www.wsd.gov.hk/en/plumbing-engineering/pipes-and-fittings-to-be-used-in-inside-service-or/index.html>

 (ii) DP refers to the Designated Person e.g. staff-in-charge of estate management or another party who oversees implementation of the WSP.

(iii) LP refers to Licensed Plumber as an example of QPs and consultants who are competent and engaged by DP to carry out the duties. LP is used as an example in the table primarily to enhance comprehensibility of users by avoiding strange term.

(iv) Please see Part D for frequency of checking and corrective actions.

(v) Content of the table may be modified as appropriate subject to the hospital’s risk assessment.

(vi) Control measures, monitoring procedures and detailed information of prevention of Legionnaires’ disease (in relation to items 1 and 2 above) are available in the latest edition of “Code of Practice for Prevention of Legionnaires’ Disease” (available via <https://www.emsd.gov.hk/en/supporting_government_initiatives/legionnaires_disease/publications/codes_of_practice/index.html>)

(vii) Tips for using wall-mounted dispensers are available via [https://www.wsd.gov.hk/filemanager/en/share/pdf/tips\_for\_using\_wall\_mounted\_dispensers\_e.pdf](https://www.wsd.gov.hk/filemanager/en/share/pdf/tips_for_using_wall_mounted_dispensers_e.pdf%20)

(viii) Free residual chlorine in water is detectable at about 0.1 mg/L.

*Risk Assessment Summary Table prepared by QP:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Post)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (LP No./

Professional Membership No., if applicable)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Signature)

**Part D**

**Routine Water Safety Checklist for the Hospital (Based on Components of Checking)**b

| **Location of check or action** | **Typical frequency of check or action** | **Typical person responsible for check or actionc** | **Item to check or action to be completed and target to be achieved** | **Hazard/ Hazardous Event No. in Part C** | **Corrective action to take if target is not achieved** |
| --- | --- | --- | --- | --- | --- |
| 1. Water storage tanks

(these can be sump tanks in the lower levels of the hospital or roof tanks in the upper levels of the hospital)  | Monthly | DP | The tank room (if there is one) is locked and secure  | 8 | Secure and lock the tank room |
| The tank access hatch is locked and secure | 8 | Secure and lock the tank access hatch |
| There are no holes, gaps or entry points through which small birds or animals could enter into the water tanks  | 8 | Repair any holes or replace part that has holes |
| Tank vents and overflow pipes have fine, gnaw-proof insect-proof mesh and the mesh is secure and intact | 8 | Repair or replace any mesh that is not secure and intact |
| Tanks are clean inside and do not contain a build-up of foreign materials or deposits | 8 | Arrange cleansing of the tank |
| No water accumulated on tank roof and the rain water drains are free of blockage | 8 | Remove accumulated water and clear rain water drains |
| Half yearly | DP | Tanks are cleansed every 6 months d | 8 | Arrange cleansing of the tank  |
| Annually | LP | Potable water roof tank levels are set to provide sufficient water pressure and level switch top up control is functioning correctly | 5-7 | Adjust level settings if required and make any necessary repairs  |
| 1. Water pumps

(these can be sump pumps in the lower levels of the hospital or booster pumps in the intermediate or higher levels of the hospital) | Monthly | DP | There is no leakage | 5-7 | Repair leak or replacement |
| Monthly | DP | There is no unusual noise during pump operations | 5-7 | Repair or replace the pump |
| Annually | LP | Pump pressure set points are correctly adjusted to provide sufficient water pressure and the pressure measurement devices and pumps are functioning correctly | 5-7 | Adjust pressure settings if required and make any necessary repairs |
| Annually | LP | Pressure and level set points for the potable water are higher (typically by at least 5 m or 50 kPa, if feasible) than for non-potable water (where applicable) | 5-7 |
| Annually (or according to supplier’s instructions) | LP | Maintain pumps as recommended by the supplier (this may entail actions such as replacing worn parts, bleeding air and lubricating to minimise noise and risk of failure) and check for evidence of parts being badly worn | 5-7 | Replace badly worn parts in good time so that the pump doesn’t fail in use resulting in a loss of pressure. |
| 1. Pressure reducing valves
 | Annually | LP | Pressure reducing valve set points are correctly adjusted to provide sufficient water pressure and the pressure measurement devices are functioning correctly | 5-7 | Adjust pressure settings if required and make any necessary repairs |
| Pressure and level set points for the potable water are higher (typically by at least 5 m or 50 kPa, where applicable) than for non-potable water (if present) | 5-7 |
| 1. Water meters
 | Annually | LP | Backflow prevention devices are in place as required under the WSD requirements and are found to be functioning correctly e | 1-5, 7 & 9 | Install or replace backflow prevention devices as appropriate  |
| 1. Pipes, joints and fittings
 | Annually | DP | Confirm that there are no leaks in pipes, joints or fittings that might indicate pipe failure and the possibility of ingress of contaminated water via the leaks if water pressure is lost  | 6 | Ask LP to replace or repair leaking pipes or joints and to check other nearby pipes or joints of similar age to see if preventive replacement is required |
| Annually | DP | Confirm that labels and markings on non-potable water pipes (where applicable) are clear  | 5 & 9 | Replace any missing or unclear labels and markings |
| In response to complaints | DP | Flush the tap at its maximum practicable flow rate until stagnant water has been replaced by fresh water. The flushing period is typically about 2 minutes or longer for larger systems. Flushing should continue until the water is visibly clear and colourless when viewed in a glass or white cup and has no noticeable taste or odour. | 1-4 | If the problem persists advise WSD |
| Annually | LP | Confirm that there are no cross-connections at the main plants that could lead to non-potable water (where applicable) flowing from potable water fittings by conducting checks such as flow tests if necessary. | 5 | Remove any cross-connections if identified |
| 1. The cold water sentinel taps of each floor/ward supplying water for drinking, food-preparation, ice-making, washing, tubs, showers, etc.f
 | Twice every month or more frequent as required | DP | Flush the tap at its maximum practicable flow rate until stagnant water has been replaced by fresh water. The flushing period is typically about 2 minutes or longer for larger systems. Flushing should continue until the water is visibly clear and colourless when viewed in a glass or white cup and has no noticeable taste or odour. Confirm that detectable free residual chlorine is present after flushing. If other disinfectants are used in the hospital, confirm that manufacturer’s recommended level of residual disinfectant is present. | 1-4 | Keep flushing until fresh water has been drawn through.Flush other taps within the floor/ward and ensure presence of detectable residual chlorine, or sufficient disinfectant level as recommended by manufacturer, after flushing.If free residual chlorine or sufficient disinfectant level cannot be established even after prolonged flushing, check with a LP and/or the disinfectant supplier. Alert WSD and/or infection-control officer if necessary. Increase flushing frequency if stagnant, metallic, discoloured or smelly water is noticed in between flushing events |
| 1. POU devices fitted to drinking taps
 | According to supplier’s instructions | DP | Inspect and maintain POU devices according to supplier’s instructions to ensure proper operation. For water filters, mark cartridge expiry dates on the casings and replace filter cartridges accordingly. | 10 | Ask supplier or qualified persons to repair POU devices if necessary. Replace any expired filter cartridges. |
| 1. Wall-mounted dispensers
 | As required | DP | Flush wall-mounted dispensers and the inlet pipes regularly according to the drinking habit e.g. conduct flushing before breakfast if the wall-mounted dispenser is idle after dinner until morning. | 10 | Set up regular flushing programme and implement flushing. |
| 1. Strainers in at least one water tap and shower head of each floor/ward f
 | Quarterly (or according to supplier’s instructions) | DP | Inspect strainers in at least one water tap (e.g. the sentinel taps) and shower head of each floor/ward. Confirm that there is no excessive buildup of deposits or scales. | 1 | Check strainers in other water taps and shower heads of the floor/ward. Arrange cleaning or replacement of strainers if necessary. |
| 1. Hot water devices (e.g. central heat exchanger or storage type water heaters, thermostatic mixing valves, etc. ) f
 | Monthly or more frequent as required | DP | Confirm that the hot water devices operate at 60°C or above, and the hot water temperature at the hot water sentinel taps is not lower than 55°C (**Caution**: To prevent accidental scalding, the hot water temperature at the tap outlets used by patients with decreased self-caring ability should not be higher than 43°C) | 1 | Adjust the operation temperature of the hot water storage devices. Arrange maintenance if the temperature cannot be suitably adjusted. |
| Monthly or more frequent as required | DP | Confirm that the water temperature at hot water inlet to thermostatic mixing valves is not lower than 55°C, and that at the water outlet is not higher than 43°C (if applicable) | 1 | Adjust the operation temperature of the thermostatic mixing valves. Arrange maintenance if the temperature cannot be suitably adjusted. |
| Annually (or according to supplier’s instructions) | DP | Inspect and maintain the hot water devices (including any thermostatic mixing valves) according to the supplier’s recommendations. Engage appropriate maintenance technician to carry out the tasks if required. | 1 | Arrange inspection and maintenance of hot water storage devices. |
| 1. Notification or advice on notice boards
 | Monthly or as required | DP | Check if updated versions of the following notification or advice, if appropriate, are available to water users through notice board or other means:i. Flushing advice after long stagnation, e.g. after long vacancy.gii. Do not take water from hot water tap for drinking water purpose.iii. Any scheduled/non-scheduled suspension of water supply.  | 1-4, 9 & 10 | Update or replace any advice provided on plumbing and inside services |

Note:

b Estate management staff is encouraged to incorporate the Checklist into the hospital’s routine maintenance schedule. The table may be rearranged according to location, check frequency or person responsible for the checking. Content of the checklist may be modified as appropriate subject to the hospital’s risk assessment. Alternative checking frequencies may be adopted with appropriate justifications.

c LP refers to Licensed Plumber as an example of QPs and consultants who are competent and engaged by DP to carry out the duties. LP is used as an example in the table primarily to enhance comprehensibility of users by avoiding strange term.

d Water storage tanks may be cleansed more frequently if required. Procedure for cleansing water tanks is available via: [https://www.wsd.gov.hk/filemanager/en/share/pdf/wwo497.pdf](%20https%3A/www.wsd.gov.hk/filemanager/en/share/pdf/wwo497.pdf)

e It may not be feasible to check functioning of backflow prevention devices if the water supply system is on line.

f If the hospital has taken alternative measures to control microbiological growth in the hot and cold water systems, please record the details including the checking procedure, goal, frequency and corrective actions.

g Typical flushing advice is available via: <http://www.wsd.gov.hk/filemanager/en/share/pdf/tips_to_reduce_lead_intake_e.pdf>

**Part E**

*Name of block (if applicable):*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Routine Water Safety Checklist for the Hospital (Based on Persons responsible for Conducting Checking)** h

**Table I. Routine checking/inspection by the Designated Person (such as the staff-in-charge of estate management)**

| **Location** | **Typical frequency** | **Item to check/action to be completed/target to be achieved** | **Observations** | **Action completed****[sign by the checking DP and date]** | **Corrective action to take****if target is not achieved** | **Corrective action completed** **[sign by the checking DP and date]** |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Water storage tanks (sump tank, roof tank, header tank or any other storage tanks)
 | Monthly | The tank room (if available) is locked and secure |  |  | Secure and lock the tank room |  |
| The tank access hatch is locked and secure |  |  | Secure and lock the tank access hatch |  |
| No holes, gaps or entry points into the water tanks through which insects, small animals or birds could enter |  |  | Repair any holes or replace part that has holes |  |
| Tank vents and overflow pipes have fine, gnaw-proof insect-proof mesh, and the mesh is secure and intact |  |  | Repair or replace mesh |  |
| Tanks are clean inside and are free of foreign materials or deposits |  |  | Arrange cleansing of the tanks |  |
| No water accumulated on tank roof and the rain water drains are free of blockage |  |  | Remove accumulated water and clear rain water drains |  |
| Half yearly | Tanks are cleansed every 6 months i |  |  | Arrange cleansing of the tanks  |  |
| 1. Water pumps ( sump pumps or booster pumps)
 | Monthly | There is no leakage |  |  | Repair leak or replacement |  |
| Monthly | There is no unusual noise during pump operations |  |  | Repair or replace the pump |  |
| 1. Pipes, joints and fittings
 | Annually | There is no leak in pipes, joints or fittings |  |  | Replace or repair leaking pipes or joints  |  |
| Annually | Labels and markings on non-potable water pipes (where applicable) are clear |  |  | Replace labels and markings |  |
| In response to complaints | Flush the tap at its maximum practicable flow rate until stagnant water has been replaced by fresh water. The flushing period is typically about 2 minutes or longer for larger systems. Flushing should continue until the water is visibly clear and colourless when viewed in a glass or white cup and has no noticeable taste or odour. |  |  | Advise WSD if problem persists |  |
| 1. The cold water sentinel taps of each floor/ward supplying water for drinking, food-preparation, ice-making, washing, tubs, showers, etc. j
 | Twice every month or more frequent as required | Flush the tap at its maximum practicable flow rate until stagnant water has been replaced by fresh water. The flushing period is typically about 2 minutes or longer for larger systems. Flushing should continue until the water is visibly clear and colourless when viewed in a glass or white cup and has no noticeable taste or odour. Confirm that detectable free residual chlorine is present after flushing. If other disinfectants are used in the hospital, confirm that manufacturer’s recommended level of residual disinfectant is present. |  |  | Keep flushing until fresh water has been drawn through.Flush other taps within the floor/ward and ensure presence of detectable residual chlorine, or sufficient disinfectant level as recommended by manufacturer, after flushing.If free residual chlorine or sufficient disinfectant level cannot be established even after prolonged flushing, check with a LP k and/or the disinfectant supplier. Alert WSD and/or infection-control officer if necessary. Increase flushing frequency if stagnant, metallic, discoloured or smelly water is noticed in between flushing events |  |
| 1. POU devices fitted to drinking taps
 | According to supplier’s instructions | Inspect and maintain POU devices according to supplier’s instructions to ensure proper operation. For water filters, mark cartridge expiry dates on the casings and replace filter cartridges accordingly. |  |  | Ask supplier or qualified persons to repair POU devices if necessary. Replace any expired filter cartridges. |  |
| 1. Wall-mounted dispensers
 | As required | Flush wall-mounted dispensers and the inlet pipes regularly according to the drinking habit e.g. conduct flushing before breakfast if the wall-mounted dispenser is idle after dinner until morning. |  |  | Set up regular flushing programme and implement flushing. |  |
| 1. Strainers in at least one water tap and shower head of each floor/ward j
 | Quarterly, or according to supplier’s instructions | The strainers in at least one water tap (e.g. the sentinel taps) and shower head of each floor/ward are inspected. Confirm that there is no excessive buildup of deposits or scales. |  |  | Check strainers of other taps and shower heads of the floor/ward. Arrange cleaning or replacement of the strainers if necessary. |  |
| 1. Hot water devices (e.g. central heat exchanger or storage type water heaters, thermostatic mixing valves, etc.) j
 | Monthly or more frequent as required | The hot water devices operate at 60°C or above, and the water temperature at the hot water sentinel taps is not lower than 55°C (**Caution**: To prevent accidental scalding, the hot water temperature at the tap outlets used by patients with decreased self-caring ability should not be higher than 43°C). |  |  | Adjust the operation temperature of the hot water storage devices. Arrange maintenance if the temperature cannot be suitably adjusted. |  |
| Monthly or more frequent as required | Confirm that the water temperature at hot water inlet to thermostatic mixing valves is not lower than 55°C, and that at the water outlet is not higher than 43°C (if applicable). |  |  | Adjust the operation temperature of the thermostatic mixing valves. Arrange maintenance if the temperature cannot be suitably adjusted. |  |
| Annually, or according to supplier’s instructions | Inspect and maintain the hot water storage devices according to the supplier’s recommendations. Engage appropriate maintenance technician to carry out the tasks if required. |  |  | Arrange inspection and maintenance of hot water storage devices. |  |
| 1. Notification or advice on notice board
 | Monthly or as required | Check if updated versions of the following notification or advice, if appropriate, are available to water users through notice board or other means:i. Flushing advice after long stagnation, e.g. after long vacancy.lii. Do not take water from hot water tap for drinking water purpose.iii. Any scheduled/non-scheduled suspension of water supply.  |  |  | Update or replace any advice provided on plumbing and inside services. |  |

Note:

h Estate management is encouraged to incorporate the Checklist into the hospital’s routine maintenance schedule. The table may be rearranged according to location, check frequency or person responsible for the checking. Content of the checklist may be modified as appropriate subject to the hospital’s risk assessment. Alternative checking frequencies may be adopted with appropriate justifications.

i Water storage tanks may be cleansed more frequently if required. Procedure for cleansing water tanks is available via: [https://www.wsd.gov.hk/filemanager/en/share/pdf/wwo497.pdf](%20https%3A/www.wsd.gov.hk/filemanager/en/share/pdf/wwo497.pdf)

j If the hospital has taken alternative measures to control microbiological growth in the hot and cold water systems, please record the details including the checking procedure, goal, frequency and corrective actions.

k LP refers to Licensed Plumber as an example of QPs and consultants who are competent and engaged by DP to carry out the duties. LP is used as an example in the table primarily to enhance comprehensibility of users by avoiding strange term.

l Typical flushing advice is available via: <http://www.wsd.gov.hk/filemanager/en/share/pdf/tips_to_reduce_lead_intake_e.pdf>

*Checklist prepared by:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Post) (minimum supervisory rank)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Signature)

**Table II. Routine checking/inspection by the Qualified Person (such as Licensed Plumber)**

*Name of block (if applicable):*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| **Location** | **Frequency**  | **Item to check/action to be completed/target to be achieved** | **Observations** | **Action completed** **[sign and date]** | **Corrective action to take if target is not achieved** | **Corrective actions completed****[sign and date]** |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Water storage tanks (sump tank, roof tank, header tank or any other storage tanks)
 | Annually | Potable water roof (header) tank levels are set to provide sufficient water pressure and level switch top up control is functioning correctly |  |  | Adjust level settings if required and make any necessary repairs  |  |
| 1. Water pumps ( sump pumps or booster pumps)
 | Pump pressure set points are correctly adjusted to provide sufficient water pressure and the pressure measurement devices and pumps are functioning correctly |  |  | Adjust level settings if required and make any necessary repairs |  |
| Pressure set points for the potable water are at higher pressure (typically by at least 5 m or 50 kPa, if feasible) than for non-potable water (where applicable) |  |  |  |
| Maintain pumps as recommended by the supplier |  |  | Replace badly worn parts in good time so that the pump doesn’t fail in use resulting in a loss of pressure |  |
| Check for any parts being badly worn |  |  |  |
| 1. Pressure reducing valves
 | Pressure reducing valve set points are correctly adjusted to provide sufficient water pressure and the pressure measurement devices are functioning correctly |  |  | Adjust pressure settings if required and make any necessary repairs |  |
| Pressure set points for the potable water are at higher pressure (typically by at least 5 m or 50 kPa, if feasible) than for non-potable water (where applicable) |  |  |  |
| 1. Water meters
 | Backflow prevention devices are in place as required under the WSD requirements and are found to be functioning correctly m |  |  | Install backflow prevention devices if missing and replace any faulty backflow prevention devices  |  |
| 1. Pipes, joints and fittings
 | Confirm that there are no cross-connections at the main plants that could lead to non-potable water (where applicable) flowing from potable water fittings by conducting checks such as flow tests if necessary |  |  | Remove any cross-connections if identified |  |

Note:

m It may not be feasible to check functioning of backflow prevention devices if the water supply system is on line.

*Checklist prepared by:*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Post)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (LP No./

Professional Membership No., if applicable)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Signature)

1. If the hospital consists of blocks with distinct internal plumbing systems, separate WSPs may be developed for individual blocks to facilitate risk assessment and implementation. [↑](#footnote-ref-1)
2. If necessary, DP may engage relevant consultants to provide technical support. Lists of QPs and consultants trained in WSP for buildings are available from the Water Supplies Department’s website (<https://www.wsd.gov.hk/en/core-businesses/water-quality/action-plan-for-enhancing-of-drinking-water-safety/water-safety-plans/index.html>). [↑](#footnote-ref-2)
3. Parts D and E contain the same checking items listed out in different formats. [↑](#footnote-ref-3)
4. It is recommended that a Designated Person (DP), such as the staff-in-charge of estate management, be assigned to oversee implementation of the WSP. [↑](#footnote-ref-4)
5. If not available, it is recommended that suitable drawings be created for the hospital. [↑](#footnote-ref-5)