

# Legionella Control Questionnaire

## Instructions for Completion

After answering all of the questions on a particular page, clicking on the "Next" button will take you on to the next page of questions. You may use the back button at anytime to review and change your answers. The save button can be used at any point and your answers will be saved. When you have reached the end of the questionnaire, and are happy with your answers, clicking on the "Submit" button will complete the process.

## Organisation details

Organisation  
name:

Address:

e mail  
address:

Contact  
telephone  
number:

Unique  
identification  
number:

## Details of cooling towers and evaporative condensers

### Evaporative condensers

Please indicate the number of evaporative condensers  
at your site:

Please indicate the number of evaporative condensers  
in constant use at your site (i.e operating 24 hours, 7  
days a week):

Please indicate how many evaporative condensers are  
not used every day:

### Cooling towers

Please indicate the number of cooling towers at your  
site:

Please state the number of cooling towers in constant  
use at your site (i.e operating 24 hours, 7 days a week):

Please indicate how many cooling towers are not used every day:

## Identifying and assessing risk sources

Do you have an assessment covering legionella risks from your evaporative cooling systems?

- Yes
- No
- Don't know

When was your risk assessment carried out or last reviewed?

- Within the last year
- Within the last 2 years
- Over 2 years ago
- Don't know

## Preparing a written scheme for preventing or controlling Risk

Do you have a written scheme for controlling Legionella risks from your evaporative cooling systems?

- Yes
- No
- Don't know

Does your written scheme incorporate an up to date schematic diagram of the water systems(s) that incorporate evaporative coolers?

- Yes
- No
- Don't know

Does your written scheme include details of the safe start up and shut down procedures?

- Yes
- No
- Don't know

Does your written scheme include arrangements to assess the cleanliness of the interior of the tower, including the packing infill in cooling towers?

- Yes
- No
- Don't know

**For cooling towers only:** which of the following activities best describes the assessment(s)?

- Visual appraisal of the packing infill surfaces
- Removal and examination of the packing infill
- Removal and examination of representative sections of packing infill
- In situ* examination of the packing infill e.g. endoscopic analysis

## Implementing, managing and monitoring precautions

Are the roles and responsibilities of your staff clearly defined in writing?

- Yes
- No
- Don't know
- Not applicable

If external contractors are used, are their responsibilities clearly defined in writing?

- Yes
- No
- Don't know
- Not applicable

When were the roles and responsibilities of those involved in your written scheme of control last reviewed?

- Within the last year
- Within the last 2 years
- Over 2 years ago
- Don't know
- Not applicable

Have all employees engaged in activities to ensure the safe operation of your evaporative cooling system(s) received training?

- Yes
- No
- Don't know
- Not applicable

## Keeping records

Do you keep records of weekly microbiological activity data e.g dip slide analysis?

- Yes
- No
- Don't know
- Not applicable

Do you keep records of weekly biocide monitoring or usage?

- Yes
- No
- Don't know
- Not applicable

Do you keep records of all corrective actions carried out?

- Yes
- No
- Don't know
- Not applicable

Do you keep records of quarterly legionella analyses?

- Yes
- No
- Don't know
- Not applicable

Have legionella been detected in the last 2 years?

- Yes
- No
- Don't know
- Not applicable

## Appointing a responsible person

Do you have a nominated "responsible person"?

- Yes
- No
- Don't know

Do you have a nominated deputy "responsible person"?

- Yes
- No
- Don't know

## Additional information

Please provide contact details of your supplier(s) of the following products and services:

Water treatment contractor

Cleaning and disinfectant contractor

Risk assessment contractor

**Thank you for completing this questionnaire**