OFFSHORE MAJOR ACCIDENT REGULATOR

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for Environment & Decommissioning

The Offshore Water Management Inspection Guide

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Summary

This IG outlines an approach to the inspection of duty holder's arrangements with respect to offshore potable water management and the key areas that inspectors should consider when inspecting this topic. It also sets out the criteria for satisfactory and unsatisfactory performance factors against which duty holder performance will be rated. Reference is made to technical standards and guidance that inspectors will use to form and opinion of legal compliance. The effectiveness of such systems is a key component of occupational health risk management and securing effective control of health risks to prevent or minimise the incidence of occupational diseases.

The Health and Safety at Work etc Act 1974 (the HSW Act), the Management of Health and Safety at Work Regulations 1999 (the Management Regulations) and the Control of Substances Hazardous to Health Regulations 2002 (COSHH) require duty holders to identify risks associated from potable water, namely from exposure to legionella bacteria (the causative agent of legionellosis, including Legionnaires' disease) and other water borne pathogens and to either prevent, or where this is not reasonably practicable, adequately control exposure to these biological agents.

To comply with their legal duties, duty holders should:

(a) identify and assess sources of risk. This includes checking whether conditions will encourage bacteria to multiply

(b) if appropriate, prepare a written scheme for preventing or controlling the risk

(c) implement, manage and monitor precautions – if control measures are to remain effective, regular monitoring of the systems and control measures is essential

(d) keep records of the precautions

(e) appoint a competent person with sufficient authority and knowledge of the water system to help take the measures needed to comply with the law

Duty holders are further required to ensure that an adequate supply of clean wholesome drinking water is available at suitable locations on an offshore installation, and the purity of the water supply is maintained and that such locations are clearly marked to show that drinking water is there.

Introduction

The purpose of this IG is to provide information and guidance to OMAR inspectors to support the delivery of consistent and effective inspection of dutyholder arrangements to ensure compliance with relevant statutory provisions and promote effective health risk management. This IG highlights key areas for inspection and provides a framework against which inspectors can judge compliance, assign performance ratings, and determine what enforcement action should be taken with respect to legislative breaches that may be found.

Typical offshore water systems include

- all water transfer equipment (eg bunkering hoses)
- water makers
- storage facilities
- distribution pipework
- utilities
- ancillary plant and equipment such as pumps and water softeners etc.

The operational guidance outlines HSE's priorities for inspection of COSHH risks offshore. It is important to note that this guidance does not include detailed information on other offshore health risks such as COSHH, Noise, Vibration, Asbestos, Ergonomics/Manual Handling, Ionising and Non-Ionising Radiations, Thermal Environment, Personal Protective Equipment, Food Hygiene, First-Aid and Welfare, which continue to form part of the remit of the ED Industrial Hygiene Team.

Relevant Legislation

Health and Safety at Work etc Act 1974

Section 2(1)

It shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all his employees.

Section 3(1)

It shall be the duty of every employer to conduct his undertaking in such a way as to ensure, so far as is reasonably practicable, that persons not in his employment who may be affected thereby are not thereby exposed to risks to their health or safety.

Section 6

Places duties on any person who designs, manufactures, imports or supplies articles and substances for use at work to ensure these articles and substances are designed, constructed and tested and that it will be safe and without risks to health at all times when it is being set, used, cleaned or maintained by a person at work

The Management of Health and Safety at Work Regulations 1999

Regulation 3

Requires every employer shall make a suitable and sufficient assessment of the risks to the health and safety of his employees to which they are exposed whilst they are at work; and the risks to the health and safety of persons not in his employment arising out of or in connection with the conduct by him of his undertaking,

Regulation 5

Requires employers make and give effect to such arrangements as are appropriate, having regard to the nature of his activities and the size of his undertaking, for the effective planning, organisation, control, monitoring and review of the preventive and protective measures.

The Control of Substances Hazardous to Health Regulations 2002

Regulation 6

Requires employers to not carry out work which is liable to expose any employees to any substance hazardous to health unless he has made a suitable and sufficient assessment of the risk created by that work to the health of those employees and of the steps that need to be taken to meet the requirements of these Regulations; and implemented the steps.

Regulation 7

Requires employers to prevent, or where this is not reasonably practicable, adequately control, the exposure of any employees to substances hazardous to health.

Regulation 8

Requires employers who provide any control measure, other thing or facility in accordance with these Regulations to take all reasonable steps to ensure that it is properly used or applied as the case may be.

Regulation 9

Requires employers to maintain, examine and test control measures and, at suitable intervals review and, if necessary, revise those measures.

Regulation 12

Requires every employer who undertakes work which is liable to expose an employee to a substance hazardous to health provide that employee with suitable and sufficient information, instruction and training.

The Offshore Installations (Offshore Safety Directive) (Safety Case etc) Regulations 2015

Regulation 16

Requires a duty holder who prepares a safety case pursuant to these Regulations demonstrate that the duty holder's management system is adequate to ensure that the relevant statutory provisions will, in respect of matters within the duty holder's control, be complied with.

Offshore Installations and Pipeline Works (Management and Administration) Regulations 1995

Regulation 17

Requires duty holders ensure that an adequate supply of clean, wholesome drinking water is available at suitable locations on the offshore installation; and such locations are clearly marked to show that drinking water is there.

Legionnaires' disease. The control of legionella bacteria in water systems, the Approved Code of Practice (ACOP) L8 (Fourth Edition)

This ACOP is aimed at duty holders, including employers, those in control of premises and those with health and safety responsibilities for others, to help them comply with their legal duties in relation to legionella. These include identifying and assessing sources of risk, preparing a scheme to prevent or control risk, implementing, managing and monitoring precautions, keeping records of precautions and appointing a manager to be responsible for others.

Action

Inspectors should review relevant documentation outlined within the IG prior to the installation visit and test compliance during the installation visit against the “Success Criteria” given in Appendix 1.

Inspection of this topic should include both inspection of the priority areas as well as an inspection of the overall policy, procedures and organisation for managing occupational health risks to establish a consistent and complete coverage of the topic. In inspecting individual topic areas, it may be necessary to have input from the relevant specialist inspectors where there are technical issues beyond the competence of the IMT inspector.

By the conclusion of the inspection, it should be possible to:

- have undertaken a targeted proactive inspection of the potable water system offshore
- investigate concerns associated with a potable water system offshore
- decide whether the measures in place were adequate to control the risk of exposure; and take any necessary enforcement action where these are deemed inadequate

When carrying out inspections covered by this IG inspectors should:

- assess duty holder responses against the success criteria in Appendix 2
- use the performance descriptors in Appendix 1 and 2 to:
    - determine the appropriate performance rating
    - the initial enforcement expectation
    - consider how and when the issues raised during an inspection are to be closed out

Background

Inhaling Legionella bacteria can lead to a number of diseases, which collectively are termed legionellosis, the most serious of which is Legionnaires’ disease. Legionnaires’ disease is a potentially fatal form of pneumonia and everyone is susceptible to infection. Cases are more common in people over 50, smokers, individuals with underlying medical conditions, e.g., diabetes, lung and heart disease and those who are immunocompromised.

Legionella bacteria can readily colonise man-made water systems presenting a risk to health where use of the system gives rise to aerosol generation. Any water system may be become colonised;

however, larger outbreaks of Legionnaires' disease have been associated with ECS such as cooling towers and evaporative condensers.

The latest edition of L8 ACOP and guidance 'Legionnaires' disease the control of Legionella bacteria in water systems' gives advice on how the requirements of the Health and Safety at Work etc. Act 1974, the Control of Substances Hazardous to Health Regulations 2002 as amended (COSHH) and the Management of Health and Safety at Work Regulations 1999 (MHSW) are applied to the risk from exposure to Legionella bacteria.

The aim of occupational hygiene is to prevent or control exposure to health risks by recognising health hazards (physical, chemical, biological, and ergonomic), evaluating the risk and establishing appropriate control measures. Biological occupational health hazards may include Legionella and other water borne bacteria.

The essential requirements for managing occupational health are the same as those for any management system. Any sub-system for managing occupational health risks should therefore have the key features of an adequate management system i.e., policy, organisation, planning and setting standards, performance measures and auditing and review. Confirmation should be obtained that a recognised code, standard or body of guidance has been considered in determining the required performance of the occupational health management system.

Other relevant Inspection Guides

The Offshore Health Risk Management Inspection Guide
The Offshore Control of Substances Hazardous to Health Inspection Guide

Specialist Advice

Specialist advice should be sought from ED Industrial Hygiene Team in circumstances when considering enforcement / debate over relevant standards on any aspects of potable water management.

Organisation

Targeting

Inspections should be planned to ensure that the necessary site personnel are available and arrangements can be made to facilitate physical inspection of the system(s).

Timing

Inspectors should undertake Inspections as part of the agreed Intervention Plan or as determined by the EDSLT.

Resources

Further guidance can be sought from:

Legionnaires' disease. The control of legionella bacteria in water systems. Approved Code of Practice and guidance L8 (Fourth edition) www.hse.gov.uk/books/l8.htm

Legionnaires' disease Part 2: The control of legionella bacteria in hot and cold-water systems, HSG274 Part 2 www.hse.gov.uk/pubns/priced/hsg274part2.pdf

Legionnaires' disease Part 3: The control of legionella bacteria in other risk systems HSG274 Part 3 www.hse.gov.uk/pubns/priced/hsg274.part3.pdf

Guidelines for Environmental Health on Offshore Installations Oil and Gas UK issue 2 published 2019 https://oeuk.org.uk/

Guidelines for Environmental Health on Offshore Installations Oil and Gas UK, Guidelines Addendum – Potable Water Management, issue 1 published April 2024 https://oeuk.org.uk/

Managing the segregation and isolation of potable water systems on offshore installations Offshore Information Sheet 4/2010 https://webarchive.nationalarchives.gov.uk/ukgwa/20241206071830/https://www.hse.gov.uk/offshore/infosheets/is4-2010.htm

Marine Safety Forum: Delivering Quality Potable Water to Offshore Installations, issue 3 published 2021 https://marinesafetyforum.org/

HSE Offshore COSHH Essentials OCE15: Potable water and legionella control www.hse.gov.uk/pubns/guidance/oce15.pdf

Recording & Reporting

The duty holder performance ratings should be entered on the Inspection Rating (IRF) Tab of the relevant installation Intervention Plan Service Order. Findings should be recorded in the post inspection report and letter.

Health and Safety

When conducting an inspection, the principles for mitigating the risk to staff are as follows: -

- Sound training for the recognition and identification of risks
- Understanding of roles and responsibilities
- Planning and conducting site visits in accordance with HSE procedures

Inspectors undertaking inspections must be suitably trained and competent. The aim is to avoid the risk of exposure by carrying out your duties without entering areas where exposure to Legionella may occur. If you are in any doubt about the hazards you face or whether control measures are adequate to safeguard your own health and safety, you should withdraw from the area and seek advice from your line manager or an experienced colleague.

In some situations (e.g., offshore) you may have to use the duty holder's hot and cold-water systems. If you are in this position, you need to assure yourself that the systems are properly managed, so you are not put at risk. If high counts of Legionella are found while you are on an offshore installation, you should follow the controls put in place by the duty holder and sought further specialist advice from ED Industrial Hygiene Team.

Appendix 1 – Plan, Do, Check, Act for Potable Water Management

PLAN	1. Is there is overall organisational Potable Water Management procedure in place? 2. Is there is a risk assessment (RA) specific to the potable water system being inspected in place? It is important that the RA considers the risk of the system as a whole, including all water transfer equipment (bunkering hoses/pumps etc), water makers, storage facilities, distribution pipework, utilities, ancillary plant and equipment such as pumps and water softeners etc. Many RAs are over-reliant on the water treatment programme. Whilst this is likely to be a vital component in controlling risk, inspectors should ensure that all aspects of the management regime are appropriately addressed. The RA should identify characteristics of the plant or its location that contribute to overall risk, such as the presence of dead legs, damaged or corroded hardware, condition of the incoming water source, predisposition to process and/or environmental contamination To assist with assessing whether a RA is suitable and sufficient, a list of the most common key requirements when assessing risk associated with a hot and cold-water system, based on mechanical, operational, chemical and management aspects is available Appendix 2.1 of the Technical Guidance HSG274 Part 2 The RA should be carried out by a competent person. The United Kingdom Accreditation Service (UKAS) accredits companies in this field, in accordance with BS8580 'Risk assessments for Legionella control – Code of practice'. Accreditation may provide some assurance that the RA is suitable and sufficient, but inspectors should not rely on this and should use their own knowledge and judgement to form an opinion on the suitability and sufficiency of individual assessments 3. Is there a written control scheme specific to the potable water system being inspected in place? The written control scheme (WCS) sets out how controls are to be implemented and the organisational arrangements to ensure these are, and remain, effective. It is likely to comprise (or signpost to) system plans/schematics, the water treatment programme, cleaning/disinfection procedures, inspection and monitoring regimes. It should clearly describe the correct operation of the system, including shutdown procedures, operating cycles, maintenance frequencies and actions to deal with matters of concern, e.g., breakdowns, abnormal/unexpected test results and/or visual fouling/contamination. An effective WCS should be well-ordered and easy to navigate to enable the duty holder to check that the correct procedures are being followed and facilitate monitoring review. A template giving suggested headings and structure is given Appendix 2.2 of the Technical Guidance HSG274 Part 2. An effective WCS will usually be one that has been jointly developed with technical and practical input from competent service provider(s) and the duty holder. The WCS should also reflect the findings of the RA. 4. Are provisions in place for the adequate supply of clean, wholesome drinking water? Are they available at suitable locations on the offshore installation? Are such locations clearly marked to show that drinking water is there?

DO	1. Have all persons who are responsible for the management of potable water onboard the offshore installation and have a duty in implementing the WCS received adequate instruction and training? Are suitable arrangements in place to allow for implementation and maintaining effectiveness of the WCS? 2. Have control measures detailed within the WCS been adopted? Are these managed accordingly at the set frequencies/durations? 3. Do appropriate management records exist for the control measures? 4. Is plant and equipment being maintained in good condition and therefore the risk is controlled to "as low as reasonably practicable" (ALARP)? 5. Is there adequate supply of clean, wholesome drinking water available at suitable locations on the offshore installation? Are such locations are clearly marked to show that drinking water is there? 6. Are there suitable arrangements in place for bunkering operations?
CHECK	1. Do records illustrate that the control measures are being managed accordingly and the control scheme remains effective? 2. Do control verification results i.e. chemical and microbiological analysis indicate the control scheme remains effective? 3. Are there monitoring systems for inspection, maintenance and testing of the facilities and equipment associated with potable water management? 4. Is there is a system in place to review the WCS at appropriate intervals? Note: review/monitoring relates to all checks on the effectiveness of the WCS and should not be restricted to the results of chemical and microbiological analysis only. 5. Are periodic arrangements in place to assess whether the RA remains suitable and sufficient? 6. Is there periodic auditing of bunkering operations, supply vessel and onshore water supply/storage and transport arrangements?
ACT	1. Are there effective arrangements for auditing and reviewing performance? Do Key Performance Indicators (KPI) or metrics exist? 2. Has an improvement plan been established derived from the RA? Have remedial actions been identified and addressed? 3. Have procedures been reviewed and amended as a result of incident outcomes, RA and WCS revalidations? 4. Have any lessons learnt been captured?

Appendix 2 – Success Criteria for Control

Offshore inspection should include, but not necessarily be limited to, the following matters

Bunkering

Are bunkering hoses flushed to waste with fresh water before bunkering? After use the hose should be drained and capped.

Are bunkering hoses disinfected before use? A suitable disinfection/hose management method is as follows

- full strength flush of the hose overboard
- all connections locally disinfected before every use (depending on frequency of use)
- hoses should be replaced as manufacturer recommendation

Water Treatment and Control Programmes

Is there a continuous (automatic) biocide dosage regime to prevent microbial growth? Manual dosing systems can be accepted subject to effective monitoring.

Do monitoring records for potable water show

- bunkered water contains biocide with a concentration of 0.2 – 1.0 ppm. Previously treated water will probably require re-chlorination, as the free chlorine level is reduced over time, particularly during transportation. On completion of bunkering ensure water is chlorinated to maintain residual levels of free chlorine 0.2 – 1.0ppm, preferably maintained around 0.5ppm
- daily: biocide levels in accommodation (at least two samples) are 0.2 – 1.0 ppm
- weekly: little/unused outlets flushed. Exterior of bottled water dispensers, including the dispensing tap are cleaned and disinfected • monthly: water temperatures at sentinel taps are (cold – below +20 ºC after 2 minutes; hot – above +50 ºC within 1 minute)
- monthly: calorifier outgoing and return water temperatures are (flow at least +60 ºC and return at least +50 ºC) • at least annually, open the drain valves of the calorifiers and have any debris in the base flushed to waste, inspected for clarity, quantity of debris and temperature. The frequency may require to be increased as indicated by the findings
- annually: cold water storage temperatures are (below +20 ºC)
- quarterly: shower heads and hoses are cleaned and disinfected
- quarterly: the internals of bottled water dispensers are cleaned and disinfected
- quarterly: bacteriological analysis is carried out
- quarterly: chemical analysis is carried out
- annually: visual inspection of hot and cold-water storage tanks are completed

• microbiological monitoring for legionella bacteria is carried out (in accordance with L8 Legionella ACOP)

Appendix 3 - Application of EMM and Duty holder Performance Assessment

When inspecting potable water management, duty holder compliance is to be assessed against the relevant success criteria. The success criteria have been determined from specific regulatory requirements, defined standards, established standards or interpretative standards.

This assessment will determine the: EMM Risk Gap, the associated topic performance score together with the Initial Enforcement Expectation as shown in the table below.

The actual enforcement may differ from that consistent with the recorded topic score depending on duty holder and strategic factors. However, should this occur then the relevant duty holder and strategic factors should be identified in the inspection report. **The Topic Score recorded on COIN must be consistent with the Initial Enforcement Expectation**

Further guidance can be found at: http://www.hse.gov.uk/enforce/emm.pdf

Inspectors should apply the EMM : Application to Health Risk (Formerly OC 130/5 - Enforcement Management Model (EMM)) http://www.hse.gov.uk/foi/internalops/ocs/100-199/130_5/index.htm

When using the EMM for decisions on enforcement relating to Legionella you should consider the following

Risk	It is credible that exposure to Legionella bacteria could result in Legionnaires' disease, which may cause death.
Immediacy (consequence) of risk	Failure to adopt appropriate control measures can result in exposure to Legionella bacteria with the possible risk of serious ill health effects. This does not require a judgement regarding the likelihood of disease occurring following exposure. Legionellosis can result from inhalation of an aerosol contaminated by Legionella bacteria. Some forms of the illness can be mild and others more serious. There is no certain way of predicting who, in a given community, will

	develop Legionnaires' disease. Some people are known to be more susceptible than others e.g., smokers, those with chronic respiratory conditions or compromised immunity. Effective treatment is available, but successful recovery depends on a number of variables, such as speed of diagnosis and the presence of underlying medical conditions. Overall, mortality rate is calculated at 10 – 15%, although this may rise significantly for immunosuppressed persons.
Benchmark standards	The benchmark set is a nil or negligible risk of a serious ill health effect. This can be achieved by applying the precautions detailed in the L8 ACOP (avoiding, if practicable, water temperatures between 20°C and 45°C, avoiding water stagnation, controlling the release of water spray, maintaining the cleanliness of the system and water in it, use of water treatment techniques and taking action to ensure the correct and safe operation and maintenance of the water system); as well as appropriate arrangements for the monitoring and review of these precautions.
Risk Gap	Non-compliance with the benchmark standards (set by COSHH, MHSW Regulations, L8 ACOP and HSG274 Technical Guidance) will produce an 'extreme risk gap' with standards established or defined.

Legionella risks are considered to be a Matter of Potential Major Concern (MPMC) when dealing with evaporative cooling systems because of the potential to cause multiple fatalities or multiple cases of ill health and therefore Risk Table 2.2 will be used when determining the risk gap. This will also the case for commercial spa pools as outbreaks typically affect large numbers of people. However, for Hot and cold-water systems, although they may be used by multiple users, they are likely to give rise to low numbers of cases of ill health so Risk Table 2.1 should be used.

The table below gives an indication of the Initial Enforcement Expectations (IEEs) when inspecting hot and cold-water systems. (Note: This table can be used to broadly read across to other risk systems, but inspectors will need to refer to specific technical guidance – HSG274). These are a

guide only. Inspectors will need to consider the full EMM including the local factors and consideration of the actual circumstances encountered.

In all cases, inspectors should consider whether the breach gives rise to an increased risk of Legionella growth and/or dispersal of aerosol. Inspectors will also need to consider:

- serving a prohibition notice if there is immediate serious risk to health
- prosecution if the risk gap is extreme and in line with the Enforcement Policy Statement. If further advice/discussion is required on the IEE, or if a Prohibition Notice or prosecution is appropriate, please contact ED Industrial Hygiene Team.

Aspect	Situation	IEE/PN	Comment
Risk Assessment	Absent	IN	**COSHH Reg 6(1)**
Risk Assessment	Not suitable or sufficient	IN/Letter	A suitable and sufficient RA should: • **account for the individual nature of each site** e.g., possible sources of airborne contamination, source and quality of make-up water, operating characteristics and periods of intermittent use • **consider the system as a whole** • involve **a site survey of the water system** including an asset register of all associated plant, pumps, strainers and other relevant items. • **include an up-to date schematic diagram showing layout of plant or system, including parts temporality out of use** **COSHH Reg 6(1) L8 ACOP para 38**
Risk Assessment	No arrangements for regular review and specifically when there is reason that it may no longer be valid	Letter	**COSHH Reg 6(3) L8 ACOP para 32**
Written Control Scheme	Absent	IN	**There should be a written scheme for controlling risk from exposure that should be properly implemented and managed** and consistent with the risk assessment. **COSHH Reg 7(3) L8 ACOP Para 58**

Written Control Scheme	Inadequate	IN/Letter	The written scheme should include: • **an up-to-date plan e.g., a schematic diagram showing the layout of the system** e.g., all associated pipework, pumps, feed tanks, heat exchangers, water softeners, quench tanks **including parts temporarily out of use** • **A description of the correct and safe operation of the system e.g.,** commissioning and recommissioning procedures; shutdown procedures; checks of warning systems and diagnostic systems in case of system malfunctions; maintenance requirements and frequencies; operating cycles – including when the system plant is in use or idle • details of **precautions to be taken** e.g., chemical treatment programme, cleaning and disinfection procedures • details of the **checks to carry out to ensure** that precautions above **remain effective and the frequency of such checks** e.g.: ○ **checks of the performance and operation of the system and its component parts** ○ **inspection of the accessible parts of the system for damage and signs of contamination** ○ **monitoring to ensure that the treatment regime continues to control to the required standard** • the **remedial actions to be taken** if the scheme is shown not to be effective, including lines of communication, control scheme reviews and modifications made **COSHH Reg 7(3), 9(1) and L8 ACOP Paras 60 and 65**

Implementation of Written Control Scheme	No Responsible person appointed	IN/Letter	No-one has been appointed to take day to day responsibility for the implementation of the written control scheme. That **person(s) should have sufficient authority, competence and knowledge of the installation to ensure that all operational procedures are carried out in a timely and effective manner.** **Management Reg 5(1) L8 ACOP Para 48**
Implementation of Written Control Scheme	Inadequate management arrangements	IN/Letter	Appropriate arrangements include: Staff responsibilities (including those not under direct control) and lines of communication are clearly defined and documented. The responsible person or an authorised deputy can be contacted at all times. Regular review of the management and communication arrangements to ensure they remain effective. **Management Reg 5(1) L8 Guidance paras 53, 54, 56**
Implementation of Written Control Scheme	Failure to provide suitable and sufficient information, instruction and training and ensure	IN/Letter	Those appointed to carry out the risk assessment and draw up and implement precautionary measures do not have the ability, experience, instruction, information, training and resources to enable them to carry out their tasks competently and safely.

	competence of those carrying out work not under their direct control		**No reasonable steps** (checks) have been made to **ensure the competence** of those who carry out work who are not under direct control of duty holder. **Note:** where there is evidence that they are not competent enforcement action should be considered under HSWA Section 3. **Management Reg 5(1) and Reg 7 L8 ACOP paras 48 and 49** ***Note:*** Courses are provided by a number of organisations including the British Occupational Hygiene Society (BOHS), City and Guilds, the Water Management Society (WMS). Often, the site's water treatment company provides the training for staff and may be fit for purpose. Inspectors will need to assess on an individual basis.
Implementation of Written Control Scheme	Absence of routine biocide checks and/or microbiological monitoring	IN/Letter	A IN should be considered if there are no monitoring results at the time of the inspection that demonstrate control. Inspectors should enquire about other monitoring checks that may have taken place. **COSHH Reg 7(3) L8 ACOP para 59(f)**

When using the EMM for decisions on enforcement relating to Legionella you should consider the following:

EMM RISK GAP					
EXTREME	**SUBSTANTIAL**	**MODERATE**	**NOMINAL**	**NONE**	**NONE**
TOPIC PERFORMANCE SCORE					
60	**50**	**40**	**30**	**20**	**10**
Unacceptable	**Very Poor**	**Poor**	**Broadly Compliant**	**Fully Compliant**	**Exemplary**
Unacceptably far below relevant minimum legal requirements. Most success criteria are not met. Degree of non-compliance extreme and widespread. Failure to recognise issues, their significance, and to demonstrate adequate commitment to take remedial action.	Substantially below the relevant minimum legal requirements. Many success criteria are not fully met. Degree of non-compliance substantial. Failures not recognised, with limited commitment to take remedial action.	Significantly below the relevant minimum legal requirements. Several success criteria are not fully met. Degree of non-compliance significant. Limited recognition of the essential relevant components of effective health and safety management, but demonstrate commitment to take remedial action	Meets most of the relevant minimum legal requirements. Most success criteria are fully met. Degree of non-compliance minor and easily remedied. Management recognise essential relevant components of effective health and safety management, and commitment to improve standards.	Meets the relevant minimum legal requirements. All success criteria are fully met. Management competent and able to demonstrate adequate identification of the principal risks, implementation of the necessary control measures, confirmation that these are used effectively; and subject to review.	Exceeds the relevant minimal legal requirements. All success criteria are fully met. Management competent, enthusiastic, and proactive in devising and implementing effective safety management system to 'good practice' or above standard. Actively seek to further improve standards.
EMM INITIAL ENFORCEMENT EXPECTATION					
Prosecution / Enforcement Notice.	Enforcement Notice / Letter.	Enforcement Notice / Letter.	Letter / Verbal warning.	None.	None.

It should be noted that:

- **the recorded score should reflect the most significant compliance gap identified** relevant to the Inspection Guide.

- the Inspection Guide and hence the allocated scores may not cover all the matters that were considered during the intervention.

- the intervention may not necessarily have used every part of the Inspection Guide – consequently the score only reflects what was inspected. **The inspection report should make it clear what aspects of the Inspection Guide the duty holder has been scored against** (or it is clearly identifiable by a letter item).

- where the score only relates to limited aspect of the Inspection Guide then consideration should be given to consulting the IG owner before finalising the score.

- proposed inspection scores should be reviewed/discussed by the full inspection team before finalising.

- the allocated performance score only reflects regulatory judgements about a duty holder's degree of compliance at a particular point in time.

Use of performance scores

HSE uses the performance scores as one of the many inputs to prioritise and plan future regulatory interventions. Prioritising intervention's is fundamental to ensuring HSE delivers its major hazards regulatory strategy whilst supporting businesses and the GB economy. HSE aims to ensure that regulatory activity is proportionate to the risk to people taking account a duty holder's performance in controlling risks. In general, this means the HSE will inspect major hazard installations and duty holders with relatively poorer risk management performance more frequently and in greater depth than lower hazard installations and duty holders where there is evidence of higher risk management performance.