

<b>Production and Use of Ice SOP</b>	<b>Type: Policy</b> <b>Register No: 12045</b> <b>Status: Public</b>
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Developed in response to:	<ul style="list-style-type: none"> <li>Safe water in healthcare premises (HTM 04-01)</li> <li>Health and Social Care Act (2008) Hygiene Code.</li> <li>Approved Code of Practice L8 – Legionnaires' disease The control of legionella bacteria in water systems</li> <li>Support for staff involved in the use of ice machines</li> </ul>
Contributes to CQC Outcome:	Regulation 15 – Premises and equipment

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Issuing Directorate	Estates & Facilities Management
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Implementation Date	8 <sup>th</sup> January 2018
Next Review Date	November 2021
Author/Contact for Information	Ian Jackson, Principal Engineer
Policy to be followed by (target staff)	All staff & Trust users
Distribution Method	Intranet & Website
Related Trust Policies (to be read in conjunction with)	Cleaning Policy Decontamination Policy Legionella Policy Food Hygiene Policy Heatwave Plan

Document Review History

Version No	Authored/Reviewed by	Active Date
1.0	Jo Mitchell	22 Nov 2012
2.0	Ian Jackson, Deputy Director of Estates & Facilities	23rd October 2014
3.0	Ian Jackson, Principal Engineer	8 <sup>th</sup> January 2018

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## **Appendices**

Appendix A Annual Audit Tool: Standard Operational Procedure for the Production and Use of Ice

## 1. Purpose

- 1.1 This policy has been developed to ensure Mid Essex Hospitals NHS Trust complies with all relevant legislation and guidance, in particular the Health Technical Memorandum 04-01: Safe water in healthcare premises, Approved Code of Practice L8 – The Control of Legionella Bacteria in Water Systems and the Health and Social Care Act (2008) Hygiene Code.

## 2. Introduction

- 1.2 It is now known that Legionnaires disease which can be contracted by aspirating water containing ice populated with legionnaire's disease. This policy puts in place measures to minimise the risk of this occurring by ensuring all ice used is of good quality and so far as reasonably practicable, free from microbiological contamination.

## 3. Aims

- 3.1 The aim of this policy is to provide guidance and procedures for the production and use of ice whilst minimising the risk to patients and staff from Legionnaires' disease and other microbiological contaminants in the ice.

## 4. Scope

- 4.1 This operational procedure applies to all staff that are required to use and procure ice machines within the Trust.

## 5. Roles and Responsibilities

- 5.1 **Director of Infection Prevention and Control (DIPC):** It is the responsibility of the DIPC to provide professional guidance with the purchase and use of ice and agree any changes to method practices.
- 5.2 **Responsible Person:** It is the responsibility of the Responsible Person (Head of Maintenance) to ensure ice machines are installed in accordance with manufacturer guidelines and comply with Health Technical Memorandum 04-01: Safe water in healthcare premises and Approved Code of Practice L8 – The Control of Legionella Bacteria in Water Systems.
- 5.3 **Procurement Department:** It is the responsibility of the Procurement department to ensure that any requests made or orders raised for ice machines or ice making equipment are passed to the Responsible Person (Head of Maintenance) Management to address.
- 5.4 **Infection Prevention Lead Nurse:** It is the responsibility of the Infection Prevention Lead Nurse to provide guidance as to when it is appropriate to use Ice Machines and in the cleaning process.
- 5.5 **Catering Manager:** It is the responsibility of the Catering Manager to ensure that the agreed level of ice for patient consumption is stocked centrally during heatwave conditions in accordance with the Trust Heatwave plan.
- 5.5 **Ward /Department Manager:** It is the responsibility of the Ward / department Manager to ensure ward/department staff are aware that only ice provided via Catering dept is to be used for patient consumption and that ice is not made locally on wards.

## 6. Control Measures

### 6.1 Crushed Ice (Not For Human Consumption)

- 6.1.1 Crushed ice is used in various locations around the Trust in laboratory processes, physiotherapy, for cooling patients and in organ transplants.
- 6.1.2 A crushed ice machines is located centrally at Broomfield Hospital for shared use. Under no circumstances must crushed ice from this machine be taken into any ward kitchen or other food preparation area or used for human consumption.
- 6.1.3 In addition, a crushed iced machine is located within John Ray ward due to the high demand for ice in this ward and must not be used by other wards and departments.
- 6.1.4 Ice must be placed inside single use plastic bags using the scoop provided and then wrapped in the appropriate textile, i.e. pillowcase. Ice should not be placed directly onto patient skin.
- 6.1.4 Wards and departments known to use crushed ice for non-human consumption will be provided with a key/code to unlock the central ice machine, a scoop and an ice cooler for transportation purposes from the central ice machine to the ward/department and instructions how to use the machine by the Estates department. Wards/departments are responsible for supplying single use plastic bags for decanting purposes and cleaning their ice cool boxes and scoop prior to and following use. **The central machine must be secured at all times to prevent unauthorised staff from using ice.**
- 6.1.6 Ice obtained from ice-making machines has been shown to be of poor microbiological quality. Consequently ice from these machines **must not be consumed**. The ice machines must display a prominent notice stating “**Not for Human Consumption**”.

### 6.2 Cubed Ice (For Human Consumption)

- 6.2.1 Ice intended for human consumption must be purchased externally from bulk producers who can provide a product that is consistently safe and fit for purpose.
- 6.2.2 This ice is purchased in a cubed form in bags and can be requested from the Catering department and will in every sense be treated as a food product in accordance with the Trust's Food Hygiene Policy. Ice trays must not be used to make ice cubes for patient consumption.

### 6.3 Procurement, Maintenance and Cleaning of Ice Machines

- 6.3.1 The purchase of ice making machines must only take place with the agreement of the Responsible Person (Head of Maintenance) and will not be sanctioned unless the machine is to be located in a non-patient area and the ice is not intended for human consumption. A formal request must be made by raising a Small Works Request Form which can be found on the intranet.
- 6.3.2 Ice machines will be serviced on a Quarterly basis the Estates department and cleaned on a weekly basis by the Domestic department. This is to ensure there is a significant period of machine operation which prevents stagnation of water in the supply pipe which is known to be a source of the growth of Legionella. Cleaning records will be maintained by the Domestic Department and recorded at the location of the machine. Estates records will be maintained by the Estates Department and also recorded at the location of the machine.

6.3.3 In the event of a faulty or dirty ice machine, users must contact the Facilities Helpline on ext. 6000 immediately and not use ice from this machine until estates department have declared it fit to do so.

6.3.4 Should the breakdown of an ice machine any have any operational impact, it must be escalated to the Lead Nurse or Departmental Manager immediately and Estates On-Call Manager in order that appropriate contingency measures can be put in place.

## **7. Training**

7.1 Where appropriate, all staff must be trained in the use and cleaning of ice machines as part of their local induction/training requirements.

## **8. Monitoring and Auditing**

8.1 Ice machines and processes will be inspected as part of an annual audit of this policy by the Estates & Facilities Management directorate. Results of the audit will be reported to the Water Quality Group. See Appendix A.

## **9. Communication and Implementation**

9.1 The procedure will be made available on the Trust's intranet & website.

9.2 The procedure will be issued to senior operational managers for them to disseminate within their wards and departments.

9.3 The approved policy will be notified in the Trust's Staff Focus that is sent via e-mail to all staff.

## **10. Equality & Diversity**

10.1 The Trust is committed to the provision of a service that is fair, accessible and meets the needs of all individuals.

## **11. References**

11.1 Approved Code of Practice L8 – The Control of Legionella Bacteria in Water Systems

11.2 Health Technical Memorandum 04-01: Safe water in healthcare premises,

11.3 Health and Social Care Act (2008) Hygiene Code.

## Estates &amp; Facilities Management

## Annual Policy Audit Tool: Standard Operational Procedure for the Production and Use of Ice

Policy Ref.	Audit Question	Answer	Comments/Actions
Next Review Date.	What is the review date of the policy and has this date passed?	Date: Yes/No	
<b>Central Ice Machine</b>			
6.1.4.	Is the ice machine secured?	Yes/No	
6.1.6	Are there clear instructions at the ice machine that the ice is not for human consumption?	Yes/No	
6.3.2.	What is the last 3 dates the ice machine was cleaned by the Domestic department? (date shown at the machine). Are these dates weekly?	Date 1: Date 2: Date 3: Yes/No	
	What is the last 2 dates the ice machine was service by the Estates department? (date shown at the machine). Are these dates monthly?	Date: 1 Date: 2 Yes/No	
<b>John Ray's Ice Machine</b>			
6.1.6	Are there clear instructions at the ice machine that the ice is not for human consumption?	Yes/No	
6.3.2.	What is the last 3 dates the ice machine was cleaned by the Domestic department? (date shown at the machine). Are these dates weekly?	Date 1: Date 2: Date 3: Yes/No	
	What is the last 2 dates the ice machine was service by the Estates department? (date shown at the machine). Are these dates monthly?	Date: 1 Date: 2 Yes/No	
<b>Estates Department</b>			
6.3.2	Does the documentation in the estates department correlate with the cleaning and service dates located at the machines?	Yes/No	

<b>Date of Audit:</b>	
<b>Name &amp; Job Title of Lead Auditor:</b>	
<b>Signature:</b>	
<b>Date of Next Water Quality Group Results Submitted:</b>	