

To: Infection Control Teams

Dear Colleagues,

We are carrying out a short 10 question survey to understand how NHS Trusts are implementing the guidance from *NHS Estates Technical Bulletin 2024/3: Designing safe spaces for patients at high risk of infection from nontuberculous mycobacteria (NTM) and other waterborne pathogens*.

This survey is being carried out to gain insight into how the recommendations of the bulletin have informed local water safety practice and capital planning across NHS organisations; and to identify common challenges in water safety management across healthcare settings. A summary of anonymised findings will be shared with participating Trusts on request.

Under the Freedom of Information Act 2000, we seek the following information within your NHS Trust / NHS Foundation Trust:

1. Name of NHS Trust/Foundation Trust:

Type here: Doncaster and Bassetlaw Hospital

2. Has your organisation reviewed NHS Estates Technical Bulletin 2024/3 with the specific note on non-tuberculous mycobacteria? (Yes/No - Double click the box to select – choose 'ticked')

Yes

No

3. Does your organisation treat any of the "high-risk" patient groups listed in the NHS Estates Technical Bulletin 2024/3? Tick all that apply (Double click the box to select).

Lung and/or heart transplant

Cystic fibrosis

Haematology/oncology patients with neutropenia,

CAR-T cell patients

Other solid organ transplant,

Patients with long-term lines

4. Do you have a Water Safety Group or equivalent multidisciplinary body for any water-related issues? (Yes/No - Double click the box to select).

Yes

No

Comment (type here):

5. Do you currently conduct routine environmental water testing for NTM? (Yes/No - Double click the box to select). If yes, please state the areas tested and the frequency of testing.

Yes

No

Areas tested (type here):

Frequency (type here):

6. Does your Water Safety Plan include specific controls for NTM, separate from general Legionella/Pseudomonas measures? (Yes/No - Double click the box to select) - If yes, please specify.

Yes

No

Specify (Type here):

7. If NTM testing is undertaken, which laboratory/method is used, and is it UKAS-accredited to ISO 17025 for NTM testing or according to the methods suggested in the bulletin? Double click the box to select

N/A - no testing undertaken

If testing, which laboratory/method is used? (type here):

Is testing method accredited (type here):

8. If you have tested, have you detected NTM in water samples from patient care areas in the last 3 years? (Yes/No; if yes, please indicate the area(s) and summarise the control measures taken).

Yes

No

N/A (have not tested for NTM)

Specify areas (type here):

Summarise control measures (type here):

9. Which control and/or remedial measures are you currently using to manage waterborne pathogens in your organisation? Tick all that apply (Double click the box to select)

- Point-of-use filters
- Temperature controls
- Chemical controls (any, i.e. chlorine, silver-copper ionization)
- Pipe removal work (including new copper pipes)
- Descaling and cleaning of water outlets
- Complete removal of outlets/sink
- Other (please list below)

Other (type here):

10. In the last 5 years, have you made any design changes in high-risk areas specifically to reduce waterborne infection risk (e.g., removal or relocation of sinks, drainage modifications, point-of-entry filtration)? (Yes/No; please provide brief examples).

- Yes
- No

Please provide brief examples (type here): Point of entry filtration planned on new job.

11. Are you planning any major refurbishment in the next 5 years and/or is your organization part of the NHS New Hospital Programme? (Tick all that apply)

- Yes - planning refurbishment works
- Yes - part of the NHS New Hospital Programme
- No - neither

Comment (type here):

If the decision is made to withhold some of this data using exemptions in the Data Protection Act, please inform us of that fact and cite the exemptions used. If you need any clarification, then please do not hesitate to contact us.

I would be grateful if you could confirm in writing that you have received this request, and we look forward to hearing from you within the 20-working day statutory time-period. Let us know if you envisage a longer period to reply to our questions.

We thank you in advance for your participation and we would be grateful if you could complete this questionnaire and return to:

Dr Niamh Reidy, email: watersafetyfoi@gmail.com (preferred)

Alternatively, via mail: **Dr Niamh Reidy – Clinical Fellow in Medical Microbiology –
Department of Microbiology, University College London Hospitals NHS Foundation Trust;
250 Euston Road, 5th Floor Central, London, NW1 2PG**