Local government authorities (LGAs) play an important role in controlling *Legionella* in NSW. The Public Health Regulation 2022 (the Regulation) specifies functions to be undertaken by local government including receiving certificates of Risk Management Plan (RMP) and audit completions in relation to cooling water systems.

Below is a checklist your LGA may use when receiving certificates of RMP and audit completions. Please note checklist items marked with an asterisk (\*) can be used to check and update your regulated systems register.

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| **RMP certificate checklist** |
| Date of RMP completion  Date RMP received by LGA\*  Date of notification to occupier  Date when next RMP is required *(maximum five years from date of this RMP)*  Overall risk level (L, M, H) for cooling water system  ☐ Action items identified in the previous RMP resolved prior to review of the risk rating  Site address (address where system is installed)\*  Cooling water system details (type of system, number of towers and unique  identification number for each tower)\*  Location of cooling water system within building/ site  Occupier name and contact details\*  Building manager name and contact details  Water treatment provider name and contact details  Mechanical services contractor name, employer and contact details  Laboratory name and contact details |

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| **Audit certificate checklist** |
| Date of Audit completion  Date Certificate of Audit completion received by LGA\*  Date of notification to occupier  Auditor name *(contact details phone number, email, postal address)*  NSW Health auditor number  Audit satisfactory YES or NO *(Compliance with RMP and Regulation* *demonstrated)\** |

**What if Certificates of RMP or audit completion are not provided before the due date?**

The timeframe for completion of risk assessments and audits is detailed under sections 12, 13 and 14 of the Regulation. Non-compliance with these sections is an offence under Section 30 of the *Public Health Act 2010*.

A penalty notice can be issued for failing to **report** a RMP in accordance with section 13 of the Regulations.

**What if Certificates of RMP or audit completion are not correctly completed?**

Sections 13 and 14 of the Regulation requires risk assessments and audits for cooling water systems to be documented in the approved forms (the current versions can be found on NSW Health’s website). If a different template is used, no criteria can be omitted and all areas in the approved forms must be addressed. If information is missing from a Certificate of RMP or audit completion, it should be deemed “incomplete”.

A penalty notice can be issued for failing to **document** a RMP in accordance with section 13 of the Regulations.

**How should the LGA respond to an audit that is not satisfactory?**

Section 7.6 of the [NSW Guidelines for Legionella Control in Cooling Water Systems](https://www.health.nsw.gov.au/environment/legionellacontrol/Pages/guidelines-legionella-control.aspx) details options that LGAs may employ in responding to audits demonstrating non-compliance. *Note: Compliance with the RMP Action Plan must be reviewed by the Auditor every year. LGAs should review the Action Plan to determine whether it has been satisfactorily completed.*

**Case Studies**

*LGA 1*

Currently there are approximately 1200 cooling water systems registered with the LGA.

The LGA’s administration team receives all RMP certificates and imports relevant information into the register including risk assessment category which determines the due date for the next RMP certificate. If any certificates are incomplete, they are returned to the occupier for attention. An occupier who fails to submit an RMP certificate by the due date is issued with a warning letter, which is followed up by the Environmental Health Team. If the occupier still does not provide an RMP certificate, the Environmental Health Team carries out an inspection of the system, and if appropriate, an Improvement Notice is issued to the occupier requiring submission of an RMP certificate and completion of any other requirements identified during the inspection.

The administration team also receive and process all Audit Certificates. A similar process as described above for RMPs is also applied to Audit certificates that are incomplete or not submitted.

The administration team forwards unsatisfactory Audit reports to the Environmental Health Team for investigation. This investigation often involves contacting the building manager to confirm if non-compliances have been rectified. However, the LGA has a risk-based compliance approach and depending on the risk identified, non-compliances may trigger immediate action. Failing to complete actions or control strategies required by the RMP may result in enforcement action, such as issuing an Improvement Notice which is followed up until compliance is achieved.

*LGA 2*

The LGA’s Environmental Health team currently receives all RMP certificates, registering the completion date and the date of the next RMP review as required. Pending the review and clarification of acceptable risk reduction strategies and their enforceability, the RMP action plan is validated against observed site conditions determined during the LGA’s routine inspection program.

The Environmental Health team also process all Audit Certificates, registering the receipt date and the due date of the next audit as required. Pending the review and clarification of the Auditor’s role in providing a detailed assessment of compliance, the LGA may request additional information from the Auditor to clarify their assessment. Audits with outcomes that contrast findings obtained during the LGAs inspection program (conducted within an audit period) may be referred to NSW Health for advice.

*LGA 3*

This LGA records Risk Management Plan and audit information when received in a centralised spreadsheet that captures dates, risk category and any noted noncompliance.

Due dates for RMPs Audit Certificates are checked at the end of every month. If items become overdue a reminder letter is sent to the occupier of the premises requesting the submission of the information required.

The spreadsheet is reviewed prior to an annual inspection (completed in summer months), or a notified Legionnaires’ case investigation, in conjunction with compliance checks of other enforceable requirements. If the information is incomplete and lacking during the inspection, enforcement action is taken in the form of an Improvement Notice for the specific information to be provided.

**Further information**

Further guidance on assessing RMP and Audit certificates is available in the [NSW Guidelines for Legionella Control in Cooling Water Systems](https://www.health.nsw.gov.au/environment/legionellacontrol/Pages/guidelines-legionella-control.aspx) and the [NSW Health website](https://www.health.nsw.gov.au/environment/legionellacontrol/Pages/default.aspx).