Legionella Internal review and audit

HS-F-020

Name of	person completing the audit:	

Job Role:

Date of Audit:

Names and job roles of persons within the company that have been questioned during the audit:

Documentation and Implementation

Is a copy of the company Legionella procedure available on the site?

Can the company demonstrate compliance with the written scheme of inspection?

Does the company have a Legionella risk assessment undertaken by a competent person within the last 2 years/24 months?

Does the company request copies of legionella risk assessments if required to work on water systems within another non-domestic premises?

Are records related to the management of legionella available for the periods stated within the procedure?

Are records of training on Legionella Awareness available for all employees that are required to work on Water systems?

Are employees or sub-contractors aware of, and understand the company/site Legionella procedure?

Key findings

Provide details on the key findings of the audits including any strengths and weaknesses:

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Remedial Actions	media	al Ac	tions
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Reference number	Description of issue that has been found	Description of the steps that need to be taken to ensure compliance with company procedure	Name and Job role of the Person responsible for	Date that the action will be complete
		company procedure	action closure	by

Signed	Date
oigneu	Date