

1. Background and objectives

- 1.1. Legionellosis is a collective term for diseases caused by legionella bacteria including the most serious Legionnaires' disease, as well as the similar but less serious conditions of Pontiac fever and Lochgoilhead fever. Legionnaires' disease is a potentially fatal form of pneumonia, and everyone is susceptible to infection. The risk increases with age, but some people are at higher risk, e.g., people over 45, smokers and heavy drinkers, people suffering from chronic respiratory or kidney disease, diabetes, lung and heart disease or anyone with an impaired immune system.
- 1.2. Legionnaires' disease is normally contracted by inhaling small droplets of water (aerosols), suspended in the air, containing the bacteria.
- 1.3. Therefore, it is important that Alliance control the risks by introducing measures which reduce and/or control the risk of legionella growth and proliferation of legionella bacteria and other organisms in the water systems and reduce, so far as is reasonably practicable, exposure to water droplets and aerosol in non-domestic and domestic stock as required. This will reduce the possibility of creating conditions in which the risk from exposure to legionella bacteria is increased.
- 1.4. Alliance must establish a policy which meets the requirements of the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999 (the Management Regulations). In addition to this, the policy must provide assurance that measures are in place to demonstrate compliance with the Control of Substances Hazardous to Health Regulations 2002 (as amended) and to identify, manage and/or mitigate risks associated with hot and cold water systems and any other systems that may cause exposure to legionella bacteria. The L8 approved code of practice, "Legionnaires' disease: The control of legionella bacteria in water system", is available to duty holders to provide practical guidance on how to comply with their legal duties in relation to legionella.
- 1.5. Alliance must also ensure compliance with water hygiene legislation is formally reported at Strategic Leadership Team (SLT) and Board level, including the details of any non-compliance and planned corrective actions.
- 1.6. The policy is relevant to all Alliance colleagues, customers, contractors and other persons or other stakeholders who may work on, occupy, visit, or use its premises, or who may be affected by its activities or services.
- 1.7. It should be used by all to ensure they understand the obligations placed upon Alliance to maintain a safe environment for customers and employees within the homes of each customer, and within all communal areas of buildings and 'other' properties (owned and managed).

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2. Policy detail

2.1. **Regulatory Standards, Legislation and Codes of Practice**

- 2.1.1. <u>Regulatory Standards</u> the application of this policy will ensure compliance with the regulatory framework and consumer standards (Home Standard) for social housing in England, and the safety and quality standard (derived from the Social Housing (regulation) Act 2024), which were introduced by the Regulator of Social Housing (RSH).
- 2.1.2. Legislation the principal legislation applicable to this policy is the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999 (the Management Regulations) and the Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH). Alliance has a legal obligation under COSHH to prevent or control exposure to biological agents. Being harmful to human health, legionella falls within the scope of these regulations.
- 2.1.3. <u>Code of Practice</u> the principal approved codes of practice applicable to this policy are:
 - ACoP L8 'Legionnaires' disease: The control of legionella bacteria in water systems' (4th edition 2013)
 - HSG274 Legionnaires' disease: Technical guidance Part 1: The control of legionella bacteria in evaporating cooling systems (2013)
 - HSG274 Legionnaires' disease: Technical guidance Part 2: The control of legionella bacteria in hot and cold water systems (2014)
 - HSG274 Legionnaires' disease: Technical guidance Part 3: The control of legionella bacteria in other risk systems (2013)
 - INDG458 Legionnaires' disease: A guide for duty holders Leaflet (HSE Books 2012).
- 2.1.4. <u>Sanctions</u> Alliance acknowledges and accepts its responsibilities in accordance with the regulatory standards, legislation and codes of practice and that failure to discharge these responsibilities properly could lead to a range of sanctions including prosecution by the Health & Safety Executive under the Health & Safety at Work Act 1974, prosecution under the Control of Substances Hazardous to Health Regulations (COSHH), prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007, and via action taken by the Regulator of Social Housing.
- 2.1.5. <u>Customers</u> Alliance will use the legal remedies available within the terms of the tenancy agreement, lease or licence should any customer refuse access to carry out essential water hygiene checks, maintenance and safety related repair works.



 <u>Non-Access</u>: We will agree an appointment with the customer to carry out the inspections or works. If the customer is not available, on the day, or refuses access, we will agree a second appointment. If this second appointment is not kept a 'no access' process will be initiated, which may result in legal action being taken to gain access.

2.2. Additional Legislation

- 2.2.1. The Water Hygiene Policy also operates in the context of the following additional legislation:
 - The Workplace (Health, Safety and Welfare) Regulations 1992
 - The Housing Act 2004
 - The Construction, Design and Management Regulations 2015
 - Landlord and Tenant Act 1985
 - The Data Protection Act 2018
 - RIDDOR 2013
 - The Social Housing (regulation) Act 2023

2.3. **Obligations**

- 2.3.1. The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH), the Management of Health and Safety at Work Regulations 1999 and the Health and Safety at Work Act 1974 place a duty, as an employer or person in control of a premises (e.g., a landlord), to take suitable precautions to prevent or control the risk of exposure to legionella.
- 2.3.2. Alliance as the 'Duty Holder' is responsible for Health and Safety and must take the right precautions to reduce the risks of exposure to Legionella, including understanding how the organisation will:
 - Identify and assess sources of risk.
 - Manage any risks.
 - Prevent or control any risks.
 - Keep and maintain the correct records.
- 2.3.3. Alliance must ensure there is a risk assessment undertaken for all hot and coldwater systems, cooling plant and any other systems that can produce water droplets to establish any potential risks and implement measures to either eliminate or control identified risks.



- 2.3.4. Alliance as the 'Duty Holder' responsible for control of legionella and water hygiene safety must appoint a competent/responsible person to take managerial responsibility for legionella control - risk assessment, production of a written scheme and implementation of that scheme to prevent or control the risks. A competent person is someone with sufficient authority, competence, necessary skills, knowledge of the system and experience.
- 2.3.5. This 'Duty Holder' should also appoint a competent person or persons to take dayto-day responsibility for controlling any identified risks from legionella bacteria.

2.4. **Statement of intent**

- 2.4.1. Alliance acknowledges and accepts its responsibilities with regard to water hygiene safety and preventing exposure to legionella.
- 2.4.2. Alliance will hold accurate records against each property it owns or manages setting out the requirements for water hygiene risk assessments and safety checks and maintenance of all water systems that could present a risk of exposure to legionella.
- 2.4.3. Alliance Legionella Risk Assessment (LRA) inspection and re-inspection dates, along with LRA and monitoring records will be held in systems or logs, that are available on site or remote from site (i.e. an office).
- 2.4.4. Alliance as the 'Duty Holder' responsible for control of legionella and water hygiene safety will appoint a competent/responsible person to take managerial responsibility for legionella control - risk assessment, production of a written scheme and implementation of that scheme to prevent or control the risks. A competent person is someone with sufficient authority, competence, necessary skills, knowledge of the system and experience.
- 2.4.5. In addition, the 'Duty Holder' will appoint a deputy responsible person who will provide cover to the responsible person in their absence. The deputy responsible person should be trained, instructed, and informed to the same level as the responsible person, and they should assist in the frequent monitoring of the control scheme(s).
- 2.4.6. This 'Duty Holder' should also appoint a competent person or persons to take dayto-day responsibility for controlling any identified risks from legionella bacteria.
- 2.4.7. Alliance will ensure that properties are risk assessed by a competent person for potential to cause exposure to legionella. This risk assessment should include:
 - Management responsibilities, including the name of the competent person carrying out the risk assessment and a description of the system.
 - Details of the competence and training of key personnel.
 - Any identified potential risk sources.



- Any means of preventing the risk or controls in place to control risks.
- Monitoring, inspection and maintenance procedures (where required).
- Records of the monitoring results and inspection and checks carried out.
- Arrangements to review the risk assessment regularly, particularly when there is reason to suspect it is no longer valid.
- 2.4.8. Where the risks are assessed to be, insignificant and are being properly managed to comply with the law, no further action is required. Alliance will periodically review these legionella risk assessments (every 2 years) in case anything changes in the system. Where a system is identified as more likely to undergo change and is therefore a higher risk, the risk assessment will be reviewed on a more frequent basis, dependent on the determined level of risk.
- 2.4.9. Alliance will ensure that a 'written scheme of control' is developed and fully implemented for all properties risk assessed as requiring controls to adequately manage the risk of legionella exposure. The schemes will be assessed by Alliance's competent person as high, medium, or low risk. The 'written scheme' will control any risks from legionella by identifying:
 - The system, e.g., developing a written schematic.
 - Who is responsible for carrying out the assessment and managing its implementation.
 - Detail of the call-out procedures for specialist contractors involved in the maintenance of the water system.
 - The safe and correct operation of the system
 - What control methods and other precautions are required and what checks will be carried out to ensure risks are being managed and how often.
 - Detail of any remedial actions undertaken if the scheme becomes ineffective.
- 2.4.10. Alliance will ensure that a risk assessed approach for water hygiene safety is adopted as part of the void standard, when carrying out works on void properties prior to re-let. These checks will be applicable on all void properties prior to commencing works which may affect the hot and cold-water systems and that any identified risk control measures are fully implemented where identified
- 2.4.11. Alliance will maintain and store adequate records in respect of all risk assessments, written schemes of control, remedial works, water quality tests and audits and shall keep these records for the time they remain current and for at least 5 years thereafter.
- 2.4.12. Alliance will ensure that a sample audit is undertaken of 5% of all written schemes of control by an independent third-party consultant to ensure that all control actions are being fully and robustly implemented by the competent person. In addition, all schemes identified as high risk will receive an annual audit.

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- 2.4.13. Alliance will ensure audits are undertaken annually, by an independent competent person, to all systems identified as a high risk (e.g., high rise buildings and older persons' schemes) to ensure that all control actions are being fully and robustly implemented.
- 2.4.14. Alliance will ensure that only suitably competent consultants, surveyors, risk assessors and engineers undertake works for the organisation in respect of water hygiene safety.
- 2.4.15. Alliance will make written schemes of control in communal areas of buildings available to inform occupants on how the risk of exposure to legionella bacteria is being managed and controlled.
- 2.4.16. Alliance will ensure that robust processes and controls are in place to ensure that all remedial works identified through risk assessments and subsequent control activities are completed within a reasonable timescale commensurate with the risk identified.
- 2.4.17. Alliance will ensure robust processes and controls are in place to ensure that any suspected outbreak of Legionellosis is properly reported as required under RIDDOR.
- 2.4.18. Alliance will have a robust process in place to gain access to properties where tenant vulnerability issues are known or identified whilst ensuring the organisation can gain timely access to any property in order to be compliant with this policy and safeguard the wellbeing of the tenant.

2.5. **Compliance risk assessment / inspection programmes**

- 2.5.1. <u>Risk assessment</u> Alliance will establish and maintain a risk assessment for water hygiene safety operations. This risk assessment will set out the organisations' key water hygiene risks together with appropriate mitigations.
- 2.5.2. <u>CDM</u>- to comply with the requirements of the Construction, Design and Management Regulations 2015 (CDM) a Construction Phase Plan will be completed for all void works, component replacement works and refurbishment projects. This plan will detail any water installations that may be affected by the works and detail all necessary work required to make safe and reinstate water installations to ensure that they continue to comply with any written scheme of control, including any testing and review of controls.
- 2.5.3. <u>Legionella risk assessments</u> Alliance will carry out a programme of legionella risk assessments and risk assessment reviews to properties containing any water system that could present a risk of exposure to legionella. These risk assessments will be reviewed at least every 2 years, or after any works have been completed to the installation.



- 2.5.4. <u>Communal Blocks and 'Other' properties</u> all communal blocks and 'other' properties will be subject an initial visit to establish whether a legionella risk assessment is required. Where a risk assessment is not required then Alliance will record this as such on their records, including the date of the initial visit. Where a legionella risk assessment is required, Alliance will ensure this communal block or 'other' (e.g. offices, commercial shops, depots, etc.) property is included in the programme.
- 2.5.5. <u>Domestic properties</u> risk assessments will be carried out to domestic properties on a sample basis. This will be a representative proportion (minimum 5%) based on similar design, size, age, heating and water systems. This programme will be supplemented with guidance and advice provided to all tenants on how to manage the risk from legionella, as well as the checks at void re-let stage.
- 2.5.6. <u>Empty properties</u> Properties left unoccupied will have frequent flushing or systems drained to comply with the Water Hygiene Procedure. Properties remaining unoccupied for more than one month shall have their hot and cold-water installations drained down. Before occupation, these premises are to have their water systems disinfected and flushed.
- 2.5.7. Alliance will carry out a programme of maintenance visits by competent persons to all properties that have a written scheme of control in place. These programmes will ensure that all maintenance and testing set out in the written scheme of control is fully completed at the times and intervals stated.
- 2.5.8. Alliance will appoint an independent competent person to complete a programme of compliance audits to 5% of written schemes of control to ensure that all control actions are being fully and robustly implemented. In addition, all schemes identified as high risk will receive an annual audit.

2.6. **Remedial work**

- 2.6.1. Alliance will ensure there is a robust process in place for the management of any follow-up works required following the completion of a legionella risk assessment or where identified by the competent person when undertaking required maintenance activities.
- 2.6.2. Alliance will ensure that there is a robust process in place to collate and record details of all remedial works and water testing completed against individual installations.
- 2.6.3. Alliance will ensure there is a robust process in place to investigate and manage all RIDDOR notices issued regarding water hygiene and legionella safety.

2.7. Record Keeping



- 2.7.1. Alliance will establish and maintain a core asset register of all properties that have a written scheme of control for water hygiene in place. This register will also hold data against each property asset of the legionella risk assessment carried out.
- 2.7.2. Alliance LRA inspection and re-inspection dates, along with LRA and monitoring records will be held in on-site logbooks and electronically.
- 2.7.3. Alliance will establish and maintain accurate records of all written schemes of control and any associated remedial works and water testing and keep these for a period of not less than 5 years. Records should include the person or people responsible for conducting the risk assessment, managing, and implementing the written scheme; any significant findings of the risk assessment; the written control scheme and its implementation; and the results of any inspection, test or check carried out, together with the dates. This should include details about the state of operation of the system, i.e. in use/not in use.
- 2.7.4. Alliance will maintain logbooks for all relevant sites as required to record the details of the results from the ongoing monitoring and inspection, where required, until the records are held digitally.
- 2.7.5. Alliance will hold and maintain accurate records on the qualifications of all consultants, surveyors, risk assessors and engineers undertaking water hygiene works for the organisation.
- 2.7.6. Alliance will ensure robust processes and controls are in place to provide and maintain appropriate levels of security for all water hygiene safety related data.

2.8. Key roles and responsibilities

- 2.8.1. The Alliance Board will have overall governance responsibility for ensuring the Water Hygiene Policy is fully implemented to ensure full compliance with the regulatory standards, legislation and approved codes of practice. As such the Board will formally approve this policy and review it every 3 (three) years (or sooner if there is a change in regulation, legislation or approved codes of practice).
- 2.8.2. The Board will receive quarterly updates on the implementation of the Water Hygiene Policy and water safety performance along with notification of any noncompliance issue which is identified. This is so they have assurance that the policy is operating effectively in practice.
- 2.8.3. The SLT will receive reports (from relevant forums) in respect of water safety management performance and ensure compliance is being achieved. They will also be notified of any non-compliance issue identified.
- 2.8.4. The Chief Operating Officer has strategic responsibility for the management of water hygiene and ensuring compliance is achieved and maintained. The Head of Customer Safety will oversee the implementation of the LRA programme and this policy

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- 2.8.5. The Head of Customer Safety will be responsible for overseeing the delivery of the agreed LRA programme and are also responsible for the prioritisation and implementation of any works arising from the LRA inspections.
- 2.8.6. Additional colleagues from relevant teams will provide key support in gaining access into properties where access is proving difficult and use standards methods to do so. They will also facilitate the controlled access or legal process to gain access as necessary.

2.9. Competent Persons

- 2.9.1. Alliance will ensure that the manager (or competent person) with lead responsibility for operational delivery is appropriately competent; holding a recognised qualification in legionella control through the completion of a certified training course designed to meet the training needs of a 'duty holder' or 'responsible' person for legionella control.
- 2.9.2. Training includes courses by BOHS (British Occupational Hygiene Society) such as P901 Management and control of building hot and cold water services, City and Guilds, CIBSE, or HABC around the requirements of ACoP L8 'Legionnaires' disease: The control of legionella bacteria in water systems'.
- 2.9.3. Alliance will ensure that only suitably competent consultants and contractors, registered members of the Legionella Control Association (LCA) or equivalent, are procured and appointed to undertake risk assessments, prepare written schemes of control and undertake works in respect of water hygiene and legionella control.
- 2.9.4. The operational team with responsibility for delivery will check the relevant qualifications of employees working for these contractors to ensure that all persons are appropriately qualified for the work that they are carrying out. These checks will be undertaken on an annual basis and evidenced appropriately.

2.10. Training

- 2.10.1. This policy and the procedures that support it will be subject to a range of training across Alliance and will involve all relevant stakeholders. The training will be bespoke to the individual stakeholders and refresher training will be provided as appropriate.
- 2.10.2. Training will include team briefings for those employees who need to have a basic understanding and awareness of water hygiene safety but who may not be actively involved in the delivery of the Water Hygiene Policy. This will be basic legionella awareness training and will be covered in relevant team meetings.
- 2.10.3. On the job training, will be provided to those employees who will be responsible for managing the programme of water hygiene checks and repair works as part of their daily job.



2.10.4. Regular tool box talks will be given to operatives and Alliance contractor partners will do this in the form of appropriate legionella prevention and water hygiene training and evidence the same as part of the annual contract management arrangements.

2.11. **Performance Reporting**

- 2.11.1. Robust key performance indicator (KPI) measures will be established and maintained to ensure Alliance is able to report on performance in relation to water hygiene / legionella safety.
- 2.11.2. KPI measures will be produced and provided to a relevant forum/s on a bi-monthly basis and Board level on a quarterly basis. As a minimum, these KPI measures will include reporting on:

Data - the total number of:

- Properties split by domestic properties, communal blocks and 'other' properties.
- Properties on the LRA programme.
- Properties not on the LRA programme.
- Properties with a valid 'in date' LRA. This is the level of compliance expressed as a number and a %

Narrative - an explanation of the:

- Current position
- Corrective action required
- Anticipated impact of corrective action
- Progress with completion of remedial works
- 2.11.3. Alliance will carry out independent third-party quality assurance audits to 5% of written schemes of control, including all high-risk installations, to ensure that all control actions are being fully and robustly implemented.
- 2.11.4. Alliance will carry out an independent audit of water hygiene and legionella safety at least once every two years. This audit will specifically test for compliance with the regulation, legislation and codes of practice and identify any non-compliance issues for correction.
- 2.11.5. Alliance will collect and provide information to support effective scrutiny by tenants of water hygiene management performance
- 2.11.6. Alliance Homes will



- collect and process information specified by the regulator relating to their performance against the tenant satisfaction measures. The information must be collected within a timeframe set by the regulator and must meet the regulator's requirements in Tenant Satisfaction Measures: Technical Requirements and Tenant Satisfaction Measures: Tenant Survey requirements.
- annually publish their performance against the tenant satisfaction measures. This should include information about how they have met the regulator's requirements set out in Tenant Satisfaction Measures: Technical requirements and Tenant Satisfaction Measures: Tenant survey requirements. This information must be published in a manner that is timely, clear, and easily accessed by tenants.
- annually submit to the regulator information specified by the regulator relating to their performance against those measures. The information must be submitted within a timeframe and in a form determined by the regulator.

2.12. Non-compliance / escalation process

- 2.12.1. Any non-compliance issue identified at an operational level will be formally reported to the Head of Customer Safety in the first instance.
- 2.12.2. The Head of Customer Safety will agree an appropriate course of corrective action with the Chief Operating Officer in order to address the non-compliance issue and the Chief Operating Officer will report details of the same to SLT.
- 2.12.3. The Director of Business Services utilising relevant forums will provide 'independent' oversight of the programme delivered by Home Repairs Service.
- 2.12.4. SLT will ensure the Board is made aware of any non-compliance issue so they can consider the implications and take action as appropriate.
- 2.12.5. In cases of a serious non-compliance issue SLT and Board will consider whether it is necessary to disclose the issue to the Regulator of Social Housing in the spirit of co-regulation as part of the Regulatory Framework.

3. Equality and diversity

3.1. This policy is subject to a periodic Equality Impact Assessment (EIA).



- 3.2. The purpose of such an assessment is to consider the effect of the policy regarding the recognised protected characteristics of equality and ensure that it does not unfairly impact any individual or group. The protected characteristics are age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, pregnancy and maternity or other grounds set out in our Equality and Diversity Strategy and Policy. Remedial action will be undertaken if a detrimental effect is identified.
- 3.3. The EIA also requires the policy author to consider whether the policy is likely to negatively impact on a person's Human Rights.
- 3.4. This policy and any other related Alliance Homes publications can be provided in other formats for those with visual, literacy or language difficulties.

4. Complaints

- 4.1. If you would like to raise a complaint in relation to this policy, you can do this by calling us on **03000 120 120** or emailing us at <u>act@alliancehomes.org.uk</u>.
- 4.2. All complaints will be handled in line with the latest Alliance Homes Complaint Handling Policy.

5. Associated documents

- 5.1. For further information see in particular:
 - No Access Procedure
 - Court Injunction Procedure
 - Onboarding New Properties Procedure (under development).

6. Version control and approval dates

Approval stage	Date completed
Equality Impact Assessment completed	01/12/23
EIA reviewed by specialist colleague within HR	4 th December 2023
SLT review / approval	15 th January 2024



Board or Committee approval	28 th February 2024
Minor amend made to insert standard complaints section, non-access paragraph and format for external publication	June 2025
Next review date	28 th February 2026

7. Appendices

Appendix 1 – Equality Impact Assessment



Appendix 1

Equality Impact Assessment

An Equalities Impact Assessment must be conducted alongside the review of an existing policy or the creation of a new one.

1. Name the Strategy, Policy, Procedure or Function (SPPF) being assessed and name of author.

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2. Aims of the SPPF being assessed.

- Whose need is it designed to meet?
- Are there any measurable elements such as time limits or age limits?

The aim of this policy is to safeguard customers and colleagues and to ensure compliance with legislation, regulation and guidance.

3. Who has been consulted in developing the SPPF?

• Make reference or links to consultation/evidence documents

Members of the Landlord Safety Compliance Group

4. Does the SPPF promote equality of opportunity?

The policy has neither a positive or negative impact on the protected characteristics as shown below, but rather ensures that all customers electrical installations are dealt with in a manner compliant with the relevant legislation, regulation and guidance.

5. Identify potential impact on each of the diversity "groups" by considering the following questions (the list is not exhaustive but an indication of the sort of questions assessors should think about):



- Might some groups find it harder to access the service?
- Do some groups have particular needs that are not well met by the current SPPF?
- What evidence do you have for your judgement (e.g. monitoring data, information from consultation/research/feedback)?
- Have staff/residents raised concerns/complaints?
- Is there local or national research to suggest there could be a problem?

Protected Characteristic	No impact	Negative impact	Positive impact	Information source/s **	Comments/evidence
Race	х				
Disability	x				
Gender	x				
Transgender	x				
Sexual orientation	x				
Religion or belief	x				
Age	x				
Marriage & Civil Partnership	x				
Pregnancy and Maternity	х				
Rural issue	x				
Social mobility	x				

Was there a negative impact identified in question 5? If yes go to question 6. if not go to question 7.

6. If "negative impact" identified in table (4) above is it?



Legal -	YES	NO
What is the level of impact? $$ -	HIGH	LOW

If it is <u>not</u> legal and/or <u>high</u> impact – (i.e.: if you have highlighted NO to legal and HIGH to impact, then the document <u>should be referred to Head of HR</u>)

7. If positive impact has been identified in table 4 above, how can it be improved upon or maximised, either in this SPPF or others?

The policy aims to ensure a consistent and fair approach is taken in all cases regardless of protected characteristic.

8. Full EIA (or if you decide full EIA is not necessary but some changes should be considered)

- Are there changes you could introduce which would make this SPPF work better for this group of people?
- Is further research or consultation required?
- 8. Does this proposal have any potential Human Rights implications?

If yes, please describe (if necessary, please refer to the Alliance Homes Group Human Rights Policy)

No.