ASBESTOS POLICY

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Relevant Staff Groups: All Staff

This document is available in other formats, including easy read summary versions and other languages upon request. Should you require this please contact the Equality and Diversity Lead on 01278 432000
Amendments: Policy amended to reflect the property transfers and the new Trust governance structure

Document objectives: This document sets out Somerset Partnership NHS Foundation Trust's Policy and Procedures for managing asbestos.

Intended recipients: All Trust staff

Committee/Group Consulted: Health, Safety and Security Management Group, Estates and Facilities Governance Group

Monitoring arrangements and indicators: See relevant section of policy

Training/resource implications: See relevant section of policy

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1. **INTRODUCTION**

1.1 This document sets out Somerset Partnership NHS Foundation Trust's Policy and Procedures for managing asbestos.

1.2 The presence of asbestos containing materials (ACM's) does not in itself constitute a danger, however ACM's become hazardous when disturbed or damaged and must be treated accordingly. Activities that give rise to airborne dust e.g. abrasion; breaking, sawing, cutting, drilling or machining ACM's are most likely to present risks.

1.3 Staff and contractors are not expected to work with or be exposed to asbestos on any property under the ownership of Somerset Partnership NHS Foundation Trust or any premises maintained by Somerset Partnership NHS Foundation Trust by a Service Level Agreement.

1.4 A limited number of staff whose normal duties may bring them into contact with existing asbestos containing materials (e.g. electrical, mechanical or building maintenance staff) will be trained in asbestos awareness on a yearly basis.

2. **PURPOSE & SCOPE**

2.1 Somerset Partnership NHS Foundation Trust's Asbestos Policy conforms to the Health & Safety at Work etc Act 1974. The Policy applies to all parts of Somerset Partnership NHS Foundation Trust without exception.

2.2 The Control of Asbestos Regulations 2012 came into force on 6 April 2012, updating previous asbestos regulations to take account of the European Commission's view that the UK had not fully implemented the EU Directive on exposure to asbestos (Directive 2009/148/EC).

2.3 Somerset Partnership NHS Foundation Trust's Policy is to prevent exposure to the hazards associated with exposure to asbestos containing materials.

2.4 To provide and maintain an Asbestos Register and to freely provide information on Asbestos. Copied to be retained on every site.

2.5 To implement an effective Asbestos containing materials management plan so that appropriate measures, such as monitoring, encapsulation, sealing, labeling, inspection or removal of the materials are undertaken.

2.6 To review every year or more frequently if changes occur or legislation is amended, the Trust's Asbestos Policy Management Plan and Procedures (Regulation L 143 Approved code of practice.)

3. **DUTIES AND RESPONSIBILITIES**

**Chief Executive**

3.1 Responsibility for Health and Safety rests ultimately with the Chief Executive, who delegates responsibility to the Director of Finance and Business Development for the safe management of Asbestos.

**Executive Lead**

3.2 The Director of Finance and Business Development is the Executive Lead with devolved responsibility for Asbestos management.
Estate Manager

3.3 Will act as ‘Responsible person for Asbestos’ and ensure compliance with the asbestos management plan.

3.4 The overall strategy for the safe operation of all building service activities including consideration of asbestos issues within the Estate under his control.

3.5 Devolving the principle functions of asbestos management to the Estates Officer for appropriate execution by him and his staff.

3.6 Responsible for keeping records of staff training.

Estate Officer

3.7 Responsible for executing the principle functions of asbestos management and day-to-day running of the Asbestos Management Plan.

3.8 Implementation and monitoring including updating of a suitable Asbestos Register in a hard copy format or a computerised management database.

3.9 Appropriately disseminating of the information contained within the Asbestos Register.

3.10 Arrange for the specialist re-inspection of all identified asbestos containing materials at intervals determined by the risk assessment.

3.11 Instructing, directing and liaising with external consultants, accredited Environmental Analysts, Surveyors and specialist licensed asbestos removal contractors.

3.12 Liaising with and advising unit, ward and department managers.

3.13 Assisting in the implementation of the Asbestos Management Plan and ensuring its progress including monitoring, prioritization, encapsulation, removal and re-inspection at intervals determined by the risk assessment.

3.14 Assessing, reviewing and recommending management actions in light of reinspection findings and changes in regulations and good working practices.

3.15 Oversee asbestos works contracts.

3.16 Estates Officer will be responsible for the selection of asbestos removal contractors to tender for contracts.

3.17 Assessing contractor's method statements, and with the consultant recommend selection based on value for money.

3.18 To carry out in association with the Trust's Health & Safety Lead, audits of asbestos removal contracts

Maintenance providers

3.19 Ensuring that all maintenance employees and contract staff under their/his control are made aware of the presence of asbestos containing materials within buildings and that consultation of the Asbestos Register takes place before any task(s) are undertaken by directly employed staff and contract staff.

3.20 To report to the Responsible person any suspect materials discovered whilst carrying out his normal duties not previously identified in the Asbestos Register.

Asbestos Removal Contractors
3.21 All Asbestos Removal Contractors will be members of ARCA (Asbestos Removal Contractors Association)

3.22 Comply with current legislation and associated approval codes of practice and guidance.

3.23 Attend site to assess and prepare quotations against asbestos related works, specifications and the contractor.

3.24 Provide a method statement for the works to the Responsible person and the statutory authority.

3.25 Methods of work for emergencies must be discussed and agreed with the Responsible person or in his absence, the Analyst. The method statement is to show the resources and timetable allocated for the project.

3.26 Attend pre-contract, progress and handover meetings as required.

3.27 Provide statutory notice to the notifying authority prior to commencing asbestos works or by agreement at the request of the Responsible person applying for a waiver against the minimum notice period carrying out their obligations under their works contract, including monitoring high standards of safety and hygiene in asbestos work areas and supplying labour, materials and equipment of a high standard with all necessary supporting documentation. Arranging transport and disposal of asbestos waste materials in accordance with current regulations and good practice.

3.28 Carrying out regular inspections of the work environment and defects found or reported by the Responsible person or the Consultant/Analyst

3.29 Provide copies of notification and consignment notes and other related documentation as soon as available to the Responsible person.

Asbestos Consultant/Analyst

3.30 Where appropriate maintain UKAS accreditation relevant to instructed tasks. If the Responsible Person for Asbestos selects a surveyor who is not accredited by UKAS, they should make reasonable enquiries to make sure that they are competent by obtaining details of their qualifications, copies of their written procedures (including quality control policies) and references to other evidence of recent similar work.

3.31 When requested, review and comment on asbestos works specifications and prior to commencement of works on the contractor's method statement.

3.32 Provide quotations on project specification, supervision of asbestos removal contracts, analytical requirements and to attend meetings as required

Information Technology Managers/Telecommunications Contractors/Unit Managers/Matron/ Site Managers

3.33 Ensuring that all maintenance employees and contract staff under their control are made aware of the presence of asbestos containing materials within buildings and that consultation of the Asbestos Register takes place before any task(s) is undertaken by directly employed staff and contract staff.

To comply with the Health & Safety Specific Issue Contracts and Contractors documents.

3.34 To report to the Responsible person of any suspect materials discovered whilst carrying out his normal duties not previously identified in the Asbestos Register.
Health & Safety Lead

3.35 Reporting incidents under RIDDOR.

3.36 Undertaking in conjunction with the Responsible person an auditing role on representative asbestos removal projects.

Unit/Ward Managers/Matrons/Site Managers

3.37 Responsible for ensuring all staff and contractors are aware of their individual responsibility regarding this Asbestos Policy & Procedures.

3.38 Be aware of the site Asbestos Register and its location.

3.39 Have systems to prevent disturbance of the fabric without prior agreement.

3.40 Immediately alerting the maintenance providers Estates Department or the Responsible person when asbestos is found or suspected, so that assessments can be made and appropriate action taken.

3.41 Ensuring that activities likely to affect asbestos containing materials are only carried out after consultation with and in agreement with the Responsible person.

Employees

3.42 Must use any devices provided for their safety, follow any procedures and attend any training provided for the purpose of Asbestos safety

3.43 Are responsible for ensuring that any activity that may disturb or damage asbestos containing materials is avoided.

3.44 Report to their head of ward/department immediately if any disturbance/damage of identified asbestos containing materials takes place, so that appropriate action is taken.

The Estates and Facilities Governance Group

3.45 Will undertake the monitoring of the implementation of this policy and report any areas of concern to the Regulation Governance Group

4. EXPLANATIONS OF TERMS USED

ACM’s - Asbestos containing Materials

AIB - Asbestos Insulation Board

UKAS - United Kingdom Accreditation System

ARCA - Asbestos Removal Contractors Association

Management Survey In Asbestos - Required during normal occupation & use of a building to manage the ACM’s. The definition of a Management Survey in Asbestos:

The Survey Guide (HSG264) is:- . The survey is the standard survey. Its purpose is to locate as far as reasonably practicable, the presence and extent of any suspect asbestos containing materials in the building which could be damaged or disturbed during normal occupancy, including foreseeable maintenance and installation, and to assess their condition.

Management surveys will often involve minor intrusive work and some disturbance. The extent of intrusion will vary between premises and depend on what is reasonably practicable for individual properties, i.e. it will depend on factors such as the type of building, the nature of construction, accessibility etc.
A management survey should include an assessment of the condition of the various asbestos containing materials and their ability to release fibres into the air if they are disturbed in some way. This 'material assessment' will give a good initial guide to the priority for managing asbestos containing materials as it will identify the materials which will most readily release airborne fibres if they are disturbed.

The survey will usually involve sampling and analysis to confirm the presence or absence of asbestos containing materials. However a management survey can also involve presuming the presence of asbestos. A management survey can be completed using a combination of sampling asbestos containing materials and presuming asbestos containing materials, or indeed, just presuming. Any materials presumed to contain asbestos must also have their condition assessed. (i.e. a material assessment).

Areas such as voids between floors and ceilings or ducts/boxed in areas that cannot be opened without intrusive means should be considered outside the scope of the

Refurbishment & Demolition Survey in Asbestos – required when the building (or part of) is to be upgraded, refurbished or demolished as ACM’s can be removed. The definition of a Refurbishment and demolition survey in Asbestos: The Survey Guide (HSG264) is:

This type of survey is used to locate and describe, as far as reasonably practicable, all asbestos containing materials in the area where the refurbishment work will take place or in the whole building if demolition is planned. The survey will be fully intrusive and involve destructive inspection, as necessary, to gain access to all areas, including those that are difficult to reach. A refurbishment and demolition survey may also be required in other circumstances e.g. when more intrusive maintenance and repair work will be carried out or for plant removal or dismantling.

5. **ASBESTOS MANAGEMENT PLAN**

5.1 Upon completion of Management or Demolition Surveys (previously classified as Type 2 and Type 3 Surveys) carried out on all Somerset Partnership NHS Foundation Trust’s properties, a Management Plan was produced. This is held by the Estates & Facilities Management Team.

Location & Condition of Asbestos

5.2 The information regarding the location and condition of asbestos containing materials at any Trust property is held by Estates & Facilities Management and the maintenance providers’ Estates Department, with a duplicate copy held by the relevant site. This information is contained within the Asbestos Register.

5.3 Somerset Partnership NHS Foundation Trust has undertaken comprehensive Surveys, carried out by UKAS (United Kingdom Accreditation Service) accredited consultants, whose surveyor's have attended training courses in accordance with HSE Guidance MDHS 100.

Material & Priority Assessments

5.4 Upon completion of the Surveys, a material assessment was produced providing information on the product type, damage/deterioration, surface treatment and asbestos type. This combined with the priority assessment (location, material extent, use of location, occupancy level, frequency of
maintenance activities) provided a risk assessment score.

5.5 The risk assessment forms the basis of asbestos management and is used to determine the management and control actions necessary.

5.6 All findings identified as either Medium or High risks will be entered into the corporate risk register.

**Action Plans & Identified Asbestos**

5.7 Where previous surveys have identified asbestos containing materials, that information will be incorporated into the Asbestos Register. This will be kept, maintained and coordinated by the Responsible person Management at the Estates & Facilities Department. This information will be openly available for reference.

5.8 Where no information regarding asbestos containing materials is available, it must be presumed to contain asbestos, until surveyed to prove otherwise. All new sampling information will be entered in to the Asbestos register.

**Long Term Asbestos Management**

5.9 The overall aim is to ensure that all asbestos containing materials, through re-inspections, remedial and removal works are effectively managed and that the risk is reduced to its lowest practical level.

**Monitoring & Re-Inspection**

5.10 All asbestos containing materials will be re-inspected at intervals determined by the risk assessment and inspections carried out by a competent external UKAS (United Kingdom Accreditation service) Accredited company person. This information will be used to update the Asbestos Register.

**Emergency Procedure**

5.11 If anyone suspects that an asbestos containing material has been disturbed, the following action should be taken immediately:

- Evacuate the area immediately, without causing alarm
- Cordon/lock off the area until a full assessment has been completed
- Contact the Estates & Facilities Department who will then arrange for a UKAS Approved analyst to attend site
- Consultation of the Asbestos Register may assist in identifying the type of suspected asbestos containing material.
- Background air sampling may be required depending on the extent of the damage. This will determine the correct procedure for making safe the damage
- Referral to Occupational Health Department may be required by anyone who may have come into contact with any Asbestos containing material.

**Monitor & Reviews**

5.12 The Management Plan will be reviewed by the Responsible person, every year to ensure that all information is correct and that objectives are being met and for compliance with ACOP L143.
6. **THE ASBESTOS REGISTER**

**Location & Access**

6.1 The master copy of the Asbestos Risk Register is held in the Estates & Facilities Department with a site specific duplicate copy held at each site and with the local maintenance providers.

6.2 Contractor's access for the site or Maintenance Providers Estates Asbestos register is during working hours, Access to the register will be logged together with a summary of the proposed work.

**Updates**

6.3 The Responsible person will update the Risk Register based on sampling; refurbishment or remedial works carried out and on information gained during Management Survey inspections. A Yearly audit will be undertaken by the Responsible person to check that the Asbestos Register has been kept up to date.

7. **PROCEDURES**

**Procedure for Previously Unidentified or Damaged Asbestos**

7.1 It is the responsibility of all staff to report any suspect or damaged asbestos containing material to the Maintenance provider Estates Department or Responsible person management. This shall apply to any damage where planned activity may cause damage or disturbance to asbestos containing materials.

**Procedure for Project Works (Minor & Major Capital)**

7.2 The Asbestos Register will be checked at the Estates & Facilities Department before any project work commences. Any areas of uncertainty not shown shall presume to contain asbestos until sampling is undertaken.

7.3 A significant responsibility is the requirement to undertake a Refurbishment & Demolition Survey of the areas before a project starts, where the work will entail demolition or exposure of parts of the structure or fabric that could not be seen during the Type 2 Survey.

7.4 Recommendations made by the Responsible person management for any remedial work shall be incorporated into the project works.

7.5 If suspect materials are discovered during the course of project works, the project manager shall halt the work, inform the Responsible person and take any necessary or recommended action that may include informing staff and building occupants and clearing the site.

7.6 The project manager shall liaise with the Responsible person for any necessary analytical works and on the most appropriate remedial action.

7.7 Upon completion of the remedial works, a copy of sampling, air monitoring level of remedial works, asbestos removal contractor and asbestos analyst shall be placed on the Project File/Health & Safety File. The Asbestos Register shall also be updated.

**Procedure for Referencing the Asbestos Register for Contractor's Site**
Areas

7.8 Where the contractor is given site control of the whole or part of a building and all existing information has been circulated by the Project Manager, the Asbestos Register must be referenced at the start of work by the Contractor’s Supervisor and this information is disseminated to all his staff and subcontractors.

Procedure for Entry into an Asbestos Contaminated Area

7.9 Restricted access will be implemented and the Engineering Responsible person will control access under such control measures as recommended by the licensed removal contractor. In addition, the Responsible person will ensure that all asbestos contractors strictly adhere to all Approved Codes of Practice and any works within the immediate or adjacent area must not be carried out without the consent of the Responsible person.

Procedure for Access into an Asbestos Enclosure

7.10 In the case of an Emergency, only staff who have received appropriate training are properly equipped and where a risk assessment has been carried out will be allowed entry into an asbestos enclosure.

Labelling Asbestos

7.11 Labelling with Industry Standard Asbestos Labels or the fixing of appropriate warning signs is to be carried out in plant rooms, boiler rooms etc where deemed necessary. All visible asbestos containing material will not be labelled as a matter of course but all known asbestos containing material will feature in the Asbestos Register. As labelling will not be adopted in common areas, i.e. wards, departments, offices, circulation areas etc, it is imperative that any person initiating any works on Trust properties must make reference to the Asbestos Register.

8.  TRAINING REQUIREMENTS

8.1 The Trust will work towards all staff being appropriately trained in line with the organisation’s Staff Mandatory Training Matrix (training needs analysis). All training documents referred to in this policy are accessible to staff within the Learning and Development Section of the Trust Intranet.

8.2 Asbestos Awareness Training will be carried out at least bi-annually to ensure the competent estates staff can fulfil the performance of their specific duties. Attendance will be recorded and maintained ready for inspection if required.

8.3 In order to allow the associated persons to act as effectively and cost-effectively as possible, all relevant and associated members of staff should be offered scheduled and appropriate training. The training should cover relevant topics such as:

i. The properties of asbestos and its effects on Health,
ii. The Types, uses and likely occurrences of ACM’s in buildings
iii. General procedures to be followed to deal with an emergency
iv. How to avoid the risks from asbestos
v. On-going monitoring/inspections

8.4 Staff with specific responsibilities for actions to control the “Risk” should be given additional training in how to carry out those particular tasks.
8.5 Deputies should receive equivalent training to the person whose function they are covering. The training required will vary from individual to individual according to their background and responsibilities.

8.6 Individual records should be kept for these staff by the Estates Manager, and staff should not be allowed to perform their duties without supervision until their training is completed. Training records should be signed by the appropriate person.

8.7 All estates staff will undertake a 2 yearly refresher course as directed by the appropriate ‘Responsible Person’.

9. **EQUALITY IMPACT ASSESSMENT**

9.1 All relevant persons are required to comply with this document and must demonstrate sensitivity and competence in relation to the nine protected characteristics as defined by the Equality Act 2010. In addition, the Trust has identified Learning Disabilities as an additional tenth protected characteristic. If you, or any other groups, believe you are disadvantaged by anything contained in this document please contact the Equality and Diversity Lead who will then actively respond to the enquiry.

10. **MONITORING COMPLIANCE AND EFFECTIVENESS**

10.1 Overall monitoring will be by the Regulation Governance Group. The Estates and Facilities Governance Group will undertake the monitoring using the Annual Management Surveys and the Annual review and update of the Asbestos risk register. The Estates and Facilities Group will escalate any areas of concern within the Governance Group reporting template to the Regulation Governance Group according to the RGG reporting schedule.

11. **COUNTER FRAUD**

11.1 The Trust is committed to the NHS Protect Counter Fraud Policy – to reduce fraud in the NHS to a minimum, keep it at that level and put funds stolen by fraud back into patient care. Therefore, consideration has been given to the inclusion of guidance with regard to the potential for fraud and corruption to occur and what action should be taken in such circumstances during the development of this procedural document.

12. **RELEVANT CARE QUALITY COMMISSION (CQC) REGISTRATION STANDARDS**

12.1 Under the **Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)**, the fundamental standards which inform this procedural document, are set out in the following regulations:

- Regulation 12: Safe care and treatment
- Regulation 15: Premises and equipment
- Regulation 16: Receiving and acting on complaints
- Regulation 17: Good governance
- Regulation 18: Staffing

12.2 Under the **CQC (Registration) Regulations 2009 (Part 4)** the requirements which inform this procedural document are set out in the following regulations:

- Regulation 12: Statement of purpose
- Regulation 18: Notification of other incidents
12.3 Detailed guidance on meeting the requirements can be found at http://www.cqc.org.uk/sites/default/files/20150311%20Guidance%20for%20providers%20on%20meeting%20the%20regulations%20FINAL%20FOR%20PUBLISHING.pdf

Relevant National Requirements
Health & Safety at Work etc Act 1974
HSC ACOP Control Asbestos Regs 2006
COSHH Control of Substances Hazardous to Health 2011

13. REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS

13.1 References
HSE HSG 247 Asbestos, License contractors Guide
HSE HSG 248 Asbestos, The analysts Guide for Sampling, Analysis & clearance procedures
HSE HSG 264 Asbestos, The Survey Guide

13.2 Cross reference to other procedural documents
Health and Safety Policy
Learning, Development and Mandatory Training Policy
Moving and Handling Policy
Record Keeping and Records Management Policy
Risk Management Policy
Untoward Events Reporting Policy

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on ‘Policies and Procedures’). Trust Guidance is accessible to staff on the Trust Intranet.