

## Asbestos Policy

Issue Date	Review Date	Version
May 2017	May 2020	3

### Purpose

The purpose of this policy is to identify the measures that the Plymouth Hospital NHS Trust is taking to mitigate the risk to employees, tenants and any others who may be affected from exposure to asbestos.

### Who should read this document?

Site Services staff must be conversant with the contents of this Policy. Employees are required to co-operate with the Trust, its partners and contractors so far as is necessary to ensure compliance with the Control of Asbestos Regulations 2012.

### Key Messages

- Plymouth Hospitals NHS Trust has Asbestos Containing Materials present on its premises.
- Disturbing Asbestos Containing Materials without the correct procedures in place can cause serious respiratory diseases.
- No contractor shall undertake any work until a site induction has been undertaken by Site Services, and received instruction on the Trusts' Asbestos Management Plan.
- Site Services staff and visiting contractors must follow safe systems of work, which are designed to eliminate the risks and reduce the level of harm as set out in the Asbestos Management Plan.
- Site Services staff and visiting contractors must be aware of emergency procedures for the tasks undertaken.

### Core accountabilities

<b>Owner</b>	Quality Systems Manager
<b>Review</b>	Health & Safety Committee
<b>Ratification</b>	Director of Planning and Site Services
<b>Dissemination</b>	Site Services Team
<b>Compliance</b>	Health & Safety Committee

### Links to other policies and procedures

Trustwide policy on Estates Services Provision  
 Asbestos Management Plan  
 Health & Safety Policy  
 Risk Management Policy  
 Guidelines for the Safe Employment of Contractors

## Version History

V1	March 2010	Approved by the Health & Safety Committee
V2	March 2014	Approved by the Health & Safety Committee
V3	March 2017	Draft

*The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.*

**An electronic version of this document is available on Trust Documents on StaffNET. Larger text, Braille and Audio versions can be made available upon request.**

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### **Note for Document Authors**

*Red text* – Indicates assistance with content of the section.

*Black text* – Standard text that relates to all formal documents and can be left in situ.

## 1 Introduction

Asbestos Containing Materials were widely used by the construction industry throughout the UK up until 1999 and Plymouth Hospitals NHS Trust (hereafter referred to as PHNT) recognises that it has a duty to protect its employees, patients and others who may be affected by its operations from unnecessary exposure to asbestos materials.

This policy establishes the mechanisms through which the Trust will identify the location and condition of asbestos containing materials in all properties under its ownership and management and contains details of how exposure to asbestos fibres will be controlled.

## 2 Purpose

In accordance with the Control of Asbestos Regulations 2012, the Trust has a 'duty to manage' the asbestos within their premises to protect anyone using or working within them from the risks to health that exposure to asbestos can cause.

## 3 Definitions

Asbestos Containing Materials (hereafter referred to as ACM's), are materials which can contain any of the 3 common forms of asbestos fibre in any proportion. ACM's fall into 2 distinct categories: -

- Low density materials which can only be handled by a HSE approved licensed contractor or
- High density materials that do not require a licensed contractor.

There are 2 types of survey that can be undertaken to identify ACM's: -

- **Management Survey** – this type of survey can be completed by presuming the presence of ACM's, sampling suspect materials for confirmation or a combination of both and is the most commonly used method.
- **Refurbishment/Demolition Survey** – this type of survey is fully intrusive which will include the identification and testing of concealed materials. This type of survey is likely to be undertaken where a structure is due to be substantially altered or demolished.

## **4 Duties**

- The implementation of this policy will be the responsibility of the Director of Planning Facilities and Estates.
- The Head of Estates Engineering will be responsible for the co-ordinating of the surveying of the properties, assessing the condition of asbestos containing materials, compiling the database and compiling any necessary guidance.
- The Head of Estates Engineering will be responsible for ensuring risk assessments are undertaken and safe systems of works are put into place, and maintenance employees are provided with information, instruction and training in the correct methods and procedures for working safety with ACM's.
- The Head of Estates Engineering will be responsible for co-ordinating the Trusts Site Induction Program for contractors, which will include information and instruction on the Trusts' Asbestos Management Plan.
- The Quality Systems Manager will be responsible for consulting with the Head of Estates Engineering to coordinate contractor and client joint responsibly in fulfilling its statutory responsibility in-line with Control of Asbestos Regulations 2012.
- The Quality Systems Manager will be responsible for co-ordinating in-house Site Services 'Asbestos Awareness' annual training and the Appointed Persons (AP's) for Asbestos 'Duty to Manage' annual training.

## **5 Main Body of Policy**

- The Site Services team will take all reasonable steps to survey all property in its ownership to identify the location and condition of ACM's and enter the details onto an Asbestos Register. The Asbestos Register is updated for every instance of change in condition or removal and re-inspections are conducted annually. This information is disseminated through the Site Induction Program and the Asbestos Management Plan, available in Trustwide Documents.
- Where ACM's are present, PHNT will make an assessment of the risk posed and put in place procedures to manage the risk. This information is disseminated through the Site Induction Program and the Asbestos Management Plan, available in Trustwide Documents.
- Where the location and/or condition of the asbestos so dictates what steps will be taken to remove the asbestos by an approved contractor as instructed by a senior member of the Site Services team.

- Employees and contractors undertaking maintenance work will be given information on its location and condition through the Site Induction Program by a senior member of the Site Services team.
- The Head of Estates Engineering will ensure that employees likely to encounter asbestos during their work will receive Asbestos Awareness training annually and that no less than two AP's for Asbestos will receive Duty to Manage asbestos training as required by *regulation 4 of the Control of Asbestos Regulations 2012*. Training records are held and monitored annually by the Site Services admin team.

## **6 Overall Responsibility for the Document**

The Director of Planning and Site Services is responsible for ratifying this document. The Site Services team has responsibility for the dissemination, implementation and review of this Policy.

## **7 Consultation and Ratification**

The design and process of review and revision of this policy will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set as default of three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved by the Health and Safety committee and ratified by the Director of Planning and Site Services.

Non-significant amendments to this document may be made, under delegated authority from the Director of Planning and Site Services, by the nominated author. These must be ratified by the Director of Planning and Site Services and should be reported, retrospectively, to the approving Health and Safety committee.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades that are directly affected by the proposed changes.

## **8 Dissemination and Implementation**

Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document owner will be responsible for agreeing the training requirements associated with the newly ratified document with the named Director of Planning and Site Services and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

## 9 Monitoring Compliance and Effectiveness

The Head of Estates Engineering, under the direction of the Associate Director of Planning and Site Services, will undertake a regular audit of the processes specified in this policy, ensuring it reflects current legislation and good practice and will be reviewed every 3 years or as required by changes in legislation.

It should be noted that the responsibilities in this policy are legally enforceable and that managers (and employees where applicable) failing to uphold their responsibilities may find themselves in breach of internal disciplinary policies and legislation.

### Designated Personnel

Name	Title	Phone No.
Julie Richards	Associate Director of Estates and Planning	Ext. 37004
Phil Tarbuck	Head of Estates Engineering (AP)	Ext. 31297
Theresa Gunn	Quality Systems Manager (AP)	Ext. 39655

## 10 References and Associated Documentation

- Health & Safety at Work Act 1974.
- The Control of Asbestos 2012.
- ACOP L143 'Managing and working with asbestos
- The Management of Health and Safety at Work Regulations 1999.
- The Workplace (Health, Safety and Welfare) Regulations 1992.
- The Construction (Design and Management) Regulations 2015.
- The Defective Premises Act 1972.

Dissemination Plan			
Document Title	Asbestos Policy		
Date Finalised	March 2017		
Previous Documents			
Action to retrieve old copies	To be managed by the Information Governance Team		
Dissemination Plan			
Recipient(s)	When	How	Responsibility
Estates Staff and Contractors		Email and Inductions	Document Control

Review Checklist		
<b>Title</b>	Is the title clear and unambiguous?	Yes
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	Yes
	Does the style & format comply?	Yes
<b>Rationale</b>	Are reasons for development of the document stated?	Yes
<b>Development Process</b>	Is the method described in brief?	Yes
	Are people involved in the development identified?	Yes
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	Yes
	Is there evidence of consultation with stakeholders and users?	Yes
<b>Content</b>	Is the objective of the document clear?	Yes
	Is the target population clear and unambiguous?	Yes
	Are the intended outcomes described?	Yes
	Are the statements clear and unambiguous?	Yes
<b>Evidence Base</b>	Is the type of evidence to support the document identified explicitly?	Yes
	Are key references cited and in full?	Yes
	Are supporting documents referenced?	Yes
<b>Approval</b>	Does the document identify which committee/group will review it?	Yes
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes
	Does the document identify which Executive Director will ratify it?	Yes
<b>Dissemination &amp; Implementation</b>	Is there an outline/plan to identify how this will be done?	Yes
	Does the plan include the necessary training/support to ensure compliance?	Yes
<b>Document Control</b>	Does the document identify where it will be held?	Yes
	Have archiving arrangements for superseded documents been addressed?	Yes
<b>Monitoring Compliance &amp; Effectiveness</b>	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes
	Is there a plan to review or audit compliance with the document?	Yes
<b>Review Date</b>	Is the review date identified?	Yes
	Is the frequency of review identified? If so is it acceptable?	Yes
<b>Overall Responsibility</b>	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes

<b>Core Information</b>	
<b>Date</b>	Feb 2017
<b>Title</b>	Asbestos Policy
<b>What are the aims, objectives &amp; projected outcomes?</b>	The Control of Asbestos Regulations 2012, the Trust has a 'duty to manage' the asbestos within their premises to protect anyone using or working within them from the risks to health that exposure to asbestos can cause. The Trust will conduct yearly asbestos surveys, manage an Asbestos Risk Register and take action to remove asbestos where necessary.
<b>Scope of the assessment</b>	
<b>Collecting data</b>	
<b>Race</b>	There is no evidence to suggest that there is an impact on race regarding this policy.
<b>Religion</b>	There is no evidence to suggest that there is an impact on religion regarding this policy.
<b>Disability</b>	There is no evidence to suggest that there is an impact on Disability regarding this policy.
<b>Sex</b>	There is no evidence to suggest that there is an impact on Sex regarding this policy.
<b>Gender Identity</b>	There is no evidence to suggest that there is an impact on Gender Identity regarding this policy.
<b>Sexual Orientation</b>	There is no evidence to suggest that there is an impact on Sexual Orientation regarding this policy.
<b>Age</b>	There is no evidence to suggest that there is an impact on Age regarding this policy.
<b>Socio-Economic</b>	There is no evidence to suggest that there is a Socio-Economic impact regarding this policy.
<b>Human Rights</b>	There is no evidence to suggest that there is an impact on Human Rights regarding this policy.
<b>What are the overall trends/patterns in the above data?</b>	No trends or patterns have been identified.
<b>Specific issues and data gaps that may need to be addressed through consultation or further research</b>	No gaps have been identified.

<b>Involving and consulting stakeholders</b>				
<b>Internal involvement and consultation</b>	Health and Safety Committee			
<b>External involvement and consultation</b>	None			
<b>Impact Assessment</b>				
<b>Overall assessment and analysis of the evidence</b>				
<b>Action Plan</b>				
<b>Action</b>	<b>Owner</b>	<b>Risks</b>	<b>Completion Date</b>	<b>Progress update</b>
Manage Asbestos Risk Register through yearly surveys.	Quality Systems Manager			