

## TRUST POLICY FOR MANAGEMENT OF ASBESTOS

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	1.0	April 2021	J Chadwick	New UHDB policy
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<b>Training and Dissemination:</b> Managers should receive the training necessary to ensure this policy is properly implemented and training should be made available to all staff identified in the Training Needs Analysis. Dissemination via the Trust Intranet.				
<b>To be read in conjunction with:</b> Trust Policy and Procedures for Incident Reporting, Analysing, Investigating and Learning (RKM 2008 020), Trust Fire Policy. Infection Control Policy. Health and Safety Policy				
<b>In consultation with and Date:</b> Estates Managers, Patient Experience, Estates & Facilities Management Improvement Group, Strategic Health, Safety & Wellbeing Group				
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<b>Contact for Review</b>			Head of Estates	
<b>Executive Lead Signature</b>			Director of Patient Experience and Chief Nurse	
<b>Approving Executive Signature</b>			Director of Patient Experience and Chief Nurse	

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## **1 Introduction**

This policy addresses the risk of Asbestos within by the University Hospital of Derby & Burton NHS Foundation Trust (UHDB) Estate

Health Technical Memorandum (HTMs/HBN's) give comprehensive advice and guidance on the design, installation and operation of specialist building and engineering technology and prohibits the use of Asbestos in construction in general.

The Trust recognises that materials containing asbestos can under certain circumstances pose a risk to the health of people breathing in asbestos fibres.

The Trust is therefore committed to ensuring, so far as is reasonably practicable through best practice, the health, safety and welfare of its employees, patients, visitors, contractors and others who may be affected by matters within its control.

The Trust has put in place a management structure to ensure the asbestos management policy objectives are met. This includes the allocation of responsibility for asbestos management to UHBD's Head of Estates and the introduction of an asbestos management plan within the Estates & Facilities Directorate.

### **1.1 Asbestos (What we should know)**

Asbestos is a naturally occurring fibrous material which was regularly used in buildings from the 1950s until the late 1990s. It can still be found today in many buildings, including homes, schools and hospitals.

Although it is now illegal to use asbestos in the construction or refurbishment of any premises, many thousands of tonnes of it were used in the past and much of it is still in place.

Asbestos is only dangerous when disturbed. If it is safely managed and contained, it doesn't present a health hazard.

Not all asbestos materials present the same risk. The measures that need to be taken for controlling the risks from materials such as pipe insulation are different from those needed in relation to asbestos cement

There are three main types of asbestos still found today. These are called 'blue asbestos' (Crocidolite), 'brown asbestos' (Amosite), and 'white asbestos' (Chrysotile). All of them are dangerous but blue and brown asbestos are more hazardous than white. They cannot be identified by their colour alone.

Asbestos cannot be identified by its colour as it may have been painted or discoloured with age, also when it is combined with other substances, the colour can change. Only technical analysis can indicate presence and type of asbestos.

### **1.2 Why Asbestos Is Dangerous**

Asbestos is mechanically strong and highly resistant to heat and chemical attack, and because of its fibrous nature it can be woven into fabrics and used as reinforcement for cement and plastics. It is the very fine fibres, invisible to the naked eye, which are dangerous when inhaled.

When materials that contain asbestos are disturbed or damaged, very small airborne respirable fibres will be released into the air. The more asbestos fibres breathed in the greater the risks to health. There is no known cure for asbestos related diseases.

These diseases will not affect you immediately; asbestos related diseases could take from 15 to 60 years to develop so people will not be aware of any sudden changes in health after breathing in asbestos fibres, but once diagnosed, it is often too late to do anything.

Every week, an average of 20 workers in the UK die from exposure to asbestos (source: HSE), making it the single greatest cause of work-related deaths.

Most illnesses are a result of past exposure in industries which used or manufactured asbestos products

## **2 Purpose and Outcomes**

It is the policy of the Trust that all asbestos removal work shall only be carried out by contractors who have a current asbestos removal licence issued by the HSE. The sampling of suspected asbestos containing material shall only be undertaken by an independent analytical laboratory holding current UKAS accreditation for bulk samples analysis and air sampling.

The Trust and its management, will do all that is reasonably practicable, to remove, or reduce the risks, related to asbestos, in the field of its construction operations and maintenance duties of its buildings plant and equipment and facilities. Where appropriate training and information will be provided by the Trust. Health surveillance and personal protective equipment will also be provided.

It is the Trust's intention to ensure effective implementation of aforementioned statements and to consider them in all aspects of Health practice and decision- making in conjunction with other Trust policies and procedures.

To this end the Hospital Trust, in compliance with its duties under the Control of Asbestos Regulations 2012, has produced this Asbestos Management Policy which shall apply to all Hospital properties on the UHDB estates, where asbestos is present.

This policy is intended for use by all staff across the five sites of UHDB.

- Royal Derby Hospital, Derby
- London Road Community Hospital, Derby
- Queens Hospital, Burton
- Sir Robert Peel Hospital, Tamworth
- Samuel Johnson Hospital, Lichfield

It applies throughout all the UHDB Premises.

University Hospitals of Derby & Burton NHS Foundation Trust is committed to the effective management of ACMs to ensure that their employees and others are not exposed to significant concentrations of asbestos fibre.

On 6<sup>th</sup> April 2012, the Control of Asbestos Regulations (CAR) 2012 came into force, updating and replacing the previous 2006 law. They contain new requirements for certain types of non-licensable work with asbestos on notification of work; designating areas where you are working on asbestos; medical surveillance and record keeping.

Regulation 4 of CAR 2012 is the duty to manage asbestos in non-domestic premises. This regulation is designed to protect those who work within a building that contains asbestos and those that may work in the fabric of the building. The regulation requires that the risk from asbestos in non-domestic premises must be managed.

The regulations were made under the Health and Safety at Work etc Act 1974. Elements of the work are also covered by Construction (Design and Management) Regulations 2007. The Management of Health and Safety at Work Regulations 1999, Confined Spaces Regulations 1997. The Hazardous Waste (England and Wales) Regulations 2005 and the Carriage of Dangerous Goods and Use of Transportable Pressure. Equipment Regulations 2009.

The code of practice dealing specifically with asbestos is: Work with materials containing asbestos (L143).

There is a host of other guidance, the most important of which, for licensed contractors and analytical laboratories is HSG 247 and HSG 248. Health and safety inspectors seek to secure compliance with the law and may refer to these guidance documents as illustrating good practice.

The largest group of workers now at risk from asbestos-related diseases are orders involved in refurbishment, maintenance and other similar trades, such as carpenters, electricians and cablers. These workers are particularly vulnerable because they are often working in unfamiliar surroundings, drilling holes through panels, removing partitions and ceilings, crawling through roof spaces etc, and may be unaware that asbestos is present. This means that they may unknowingly, be exposing themselves to asbestos. Appendix 3 of the Asbestos Management Plan lists commonly found ACMs.

The activities where these ACMs could be disturbed include the following:

- Major building works (refurbishment/demolition)
- Planned maintenance work
- Emergency/reactive maintenance

In line with HSE guidelines, there is no policy to remove ACMs, but to manage them and only remove where necessary. As a consequence, systems and procedures are being put in place to control the day-to-day activities on the fabric of the Trust's premises.

This Asbestos Management Policy outlines:

- The Trusts approach to the asbestos management
- Roles and responsibilities of key personnel in delivering the plan
- Training provided to key personnel

The Asbestos Management Plan outlines:

- The acquirement and management of knowledge on the ACMs present in Trust premises.
- Procedures and systems for the day to day management of work on ACMs
- Procedures for monitoring the condition of ACMs
- Auditing and monitoring of the plan
- Review of the plan

This policy applies to locum, permanent, and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), bank staff, Non-Executive Directors and those undertaking research working within UHDB NHS Foundation Trust, in line with the Trust's Inclusion Policy. It also applies to external contractors, agency workers, and other workers who are assigned to UHDB.

### **3 Definitions used**

<b>HSE</b>	Health and Safety Executive
<b>HSG</b>	Health and Safety Guidance
<b>ACM</b>	Asbestos Containing Materials
<b>CAR</b>	Medicines Healthcare Regulatory Authority
<b>CDM</b>	Construction Design and Management Regulation 2015
<b>DH</b>	Duty Holder
<b>DDH</b>	Deputy Duty holder

## **4 Key Responsibilities/Duties**

### **4.1 Chief Executive**

Ultimate management Duty Holder responsibility for the Asbestos containing materials is with the UHDB Chief Executive. Responsibilities include the allocation of resources and the appointment of personnel to allow effective management.

The Chief Executive herein delegates day-to-day management responsibility for the Asbestos management to the Director of Patient Experience, Estates and Facilities Management as the delegated (Duty holder)

### **4.2 Director of Patient Experience, Estates & Facilities Management – Duty Holder**

As the Delegated Duty Holder, the Director of Patient Experience, Estates & Facilities Management is responsible for overseeing the day to day management responsibilities for the management and/or removal of Asbestos across the Trust's estate, these responsibilities are further delegated to the Deputy Duty Holders as below

### **4.3 General Manager Facilities Contract Derby Healthcare PLC – Deputy Duty Holder**

The General Manager for Derby Healthcare will have responsibility for the operational management of contracted out services on the Royal Derby Hospital Site only.

### **4.4 Head of Estates – Deputy Duty Holder**

Head of Estates will have responsibility for the operational management of contracted out services on the Owned Estates only which includes:

- Queens Hospital (Burton)
- The Florence Nightingale Community Hospital (Derby)
- Samuel Johnson Community Hospital (Lichfield)
- Sir Robert Peel Community Hospital (Tamworth).

Management of asbestos for UHDB is controlled by the associated Estates Department.

Their role is to:

- Oversee the asbestos management plan
- Ensure that the asbestos management plan is implemented and continues to be effective
- Ensure that is disseminated to all relevant parties
- Ensure that all personnel with responsibilities under this management plan are aware of their responsibilities
- Ensure that all key persons receive training commensurate with their responsibilities under this plan
- Ensure that effective systems and procedures are in place to prevent uncontrolled work on ACMs and to ensure employees and others are not exposed to ACMs as a result of their location or condition
- Ensure that ACMs that become deteriorated or damaged are repaired removed or isolated
- Ensure that the asbestos management plan is reviewed annually
- Make sure amendments are made to the asbestos management plan, where necessary, as a result of the annual review or where during the course of the year

deficiencies are highlighted

This will mean that all premises will have a 'responsible person' who

- Has received appropriate training
- Understands how to inspect building materials for damage and deterioration and knows when this is significant
- Is the first point of contact, for that site, for asbestos issues and knows who to contact when damage and deterioration is found or for any other asbestos issue

#### **4.5 Estates Building Manager - Appointed Responsible Person for Asbestos Management**

The Estates Building Manager (Appointed Responsible Person for Asbestos) will have responsibility for the day to day coordination and operational management of contracted out services on the Owned Estates only which includes:

- Queens Hospital (Burton)
- The Florence Nightingale Community Hospital (Derby)
- Samuel Johnson Community Hospital (Lichfield)
- Sir Robert Peel Community Hospital (Tamworth)

#### **4.6 Maintenance Operatives**

Maintenance operatives need to know the procedures they will follow before doing any work on the fabric of the building or any plant or equipment.

This training can be achieved through team briefings for all employees, annual awareness training or toolbox refresher talks for trade staff and by sending key individuals on a general awareness training course. To ensure employees remain aware of the asbestos management plan and relevant procedures, information will be posted on notice boards, re-iterated at future briefings or similar.

#### **4.7 Contractors**

Where appropriate, contractors will be made aware of procedures for managing ACMs in Trust buildings before they arrive on site or immediately after they arrive on site.

#### **4.8 All Employees**

All employees will have a basic general awareness of asbestos that should include:

- Health effects of asbestos and that ACMs in good condition pose no risk to their health
- How UHDB Trust manage their ACMs
- What to expect from as maintenance and building operatives
- What to do if they find damaged asbestos

#### **4.9 Strategic Health, Safety & Wellbeing Group**

The SHSWG will acts as the strategic focus for Health and Safety issues across the Trust using the Health and Safety Policy Statement as a basis to drive decision making to

implement the policy statement through best practice and development of a Health and Safety management system.

To indirectly ensure compliance with:-

- Control of Asbestos Regulations 2012
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and CQC Guidance for providers on meeting the regulations
- Health and Safety at Work Act 1974
- REACH (Registration, Evaluation, Authorisation and Restriction of Chemicals Regulations 2006).
- HSE Guidance

## **5 Implementation of the Policy**

Implementation of this policy shall be the responsibility of the Appointed Responsible Person for Asbestos Management as named within the Trusts' Asbestos Management Plan

The document scope covers the main principles of asbestos management and obligations under Control of Asbestos Regulations (CAR) 2012; providing a high-level overview of the principles adopted to develop, manage and maintain a comprehensive Asbestos Management Plan.

Key management processes and actions for implementing the policy are detailed within L143, HSG227, and HSG264 also the requirement for a management plan to be in place.

## **6 Training**

Management aims to control work related risks and ensure safe working practices. All training needs will be identified and a programme of training, monitoring and control will be followed as detailed below. It is essential that personnel at all levels have a sound general knowledge of ACM's, further, that all staff will be trained in relationship to their responsibilities.

The relevant line manager for staff within the areas of responsibility should ensure that staff mentioned below have received awareness training and that refresher courses are arranged in accordance with Table 1 below.

<u>Position</u>	<u>Asbestos Awareness Course</u>	<u>Management of Asbestos</u>
Duty Holder	Annually	3 yearly
Deputy Duty Holder	Annually	3 yearly
Responsible person	Annually	
Trade Staff	Annually	

Individual training records will be held and used to determine future training events and requirements.

## **7 Communications**

Stakeholders in the management of Asbestos have responsibilities as defined earlier in this document. Line managers must ensure that any staff with responsibilities for Asbestos are aware of this document and are fully conversant with the contents herein. Additionally, it is the responsibility of the Coordinating Duty Holder to ensure that all staff have access to the policy and procedures or relevant departmental extracts.

Further details of how to deal with Asbestos, types, processes and procedures are given in UHDB's Asbestos Management Plan, the plan must be read in conjunction with this policy as it contains essential information for the safe management of Asbestos and in turn the safety of Patients, Staff and Visitors.

## 8 Monitoring Compliance and Effectiveness

Monitoring Requirement :	Quarterly review on Asbestos incidents. Quarterly review of training compliance Annual review of Asbestos management survey and remedial actions. NHS Premises Assurance Model (PAM) – assurance framework compliance reporting
Monitoring Method:	Annual Report to Strategic Health & Safety Wellbeing Group
Report Prepared by:	General Manager – Facilities Management
Monitoring Report presented to:	General Manager – Facilities Management
Frequency of Report	Annually

## 9 References

Source of data	Date of publication/ issue	Detail of requirement
Health and Safety Executive (HSE)	Available at <a href="#">HSE: Asbestos - health and safety in the workplace</a>	Asbestos health and safety online guidance
HSE	2004	HSG227 A comprehensive guide to managing Asbestos in premises
HSE	2012	HSG247 Asbestos: The licenced contractors' guide
HSE	2006	HG248 Asbestos: The analysts' guide for sampling analysis and clearance procedures
HSE	2012	HSG264 Asbestos: The survey guide. 2 <sup>nd</sup> ed
HSE	2012	INDG223 Managing asbestos in buildings: A brief guide. 5 <sup>th</sup> ed
HSE	2013	Managing and working with asbestos. 2 <sup>nd</sup> ed
UK Parliament	1974	Health and Safety at Work Act
UK Parliament	1999	Management of Health and Safety at Work Regulations
UK Parliament	2012	Control of Asbestos Regulations
HSE	1996	Health and Safety (Safety Signs and Signals ) The Health and Safety Regulations. 3 <sup>rd</sup> ed