

NHS Lothian
Operational Procedures
For
Management & Control of
Asbestos Containing Material

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CONTENTS

| Section | Title | Page |
|----------------|--|-------------|
| 1. | INTRODUCTION | 3 |
| 2. | AIMS AND OBJECTIVES | 3 |
| 2.1 | Objectives of the procedures | |
| 2.2 | Associated Documentation | |
| 3. | ROLES AND RESPONSIBILITIES | 3 |
| 4. | OPERATIONAL GUIDELINES | 5 |
| 4.1 | Asbestos Management | 5 |
| 4.2 | Suspected Asbestos | 8 |
| 4.3 | Monitoring | 9 |
| 4.4 | Asbestos Work - NHS Lothian Staff | 9 |
| 4.5 | Asbestos Removal Contractors | 10 |
| 4.6 | Information for Employees | 14 |
| 4.7 | Information, Instruction and Training | 14 |
| 4.8 | Purchasing | 18 |
| 4.9 | Emergency Procedures | 18 |
| 4.10 | Asbestos Reassessment | 19 |
| 4.11 | Audit | 19 |
| 4.12 | Review | 19 |
| 5. | PROJECTS & MINOR WORKS (Estates, Capital Projects, IT, etc) | 20 |

APPENDICES

| | |
|-----------|--|
| A1 | Asbestos Contractors |
| A2 | Emergency Operational Procedures |
| A3 | Asbestos Audit Agenda |
| A4 | Non-licensed asbestos removal tasks |
| A5 | Material Assessment Algorithm |
| A6 | Other Useful Information |

1. INTRODUCTION

- 1.1 This document sets out the procedure for dealing with asbestos which is known or is found to be situated in the premises of NHS Lothian.

2. AIMS AND OBJECTIVES

- 2.1 For the purposes of this procedure all types of asbestos (chrysotile, amosite, crocidolite, etc) will be treated the same and will be defined generally as the term asbestos.
- 2.2 NHS Lothian will take all reasonable steps to secure the health, safety and welfare of all persons who may foreseeably be exposed to asbestos. The objective is to keep exposure to and risks from asbestos to a minimum whilst managing the asbestos materials in NHS Lothian properties.
- 2.3 All asbestos will be maintained in a sealed and safe condition or will be removed as part of an on-going maintenance programme. Each site will have its own Register. Information is available from the local Area Manager Hard FM
- 2.4 The Director of Operations Facilities, on behalf of the Chief Executive, will have overall responsibility for the implementation of this procedure and delegate managerial responsibility to the Head of Operations Hard FM. Day-to-day operational responsibility is delegated to the Area Managers Hard FM for their own District. IT, Telecoms, Capital Planning and any other Departments or managers who engage contractors to carry out work(s) on NHS Lothian premises will have their own responsibilities.
- 2.5 Staff must take cognisance of this procedure when they invite contractors on to NHS Lothian premises. The contractor MUST liaise with the Facilities before work commences. Advice on procedures can be sought from Facilities. Staff should be conversant with NHS Lothian Asbestos Policy

3. ORGANISATIONAL ROLES AND RESPONSIBILITIES

- 3.1 The Organisational Roles & Responsibilities are given in the NHS Lothian Policy for the Management and Control of Asbestos Containing Materials.
- 3.2 It is essential that clear lines of managerial responsibility are in place for the avoidance of any doubt as to who is responsible for dealing with issues arising from the presence or discovery of asbestos or asbestos-containing materials (ACMs).
- 3.3 A periodic review of management systems should take place on a three-yearly basis to ensure that agreed procedures are being satisfactorily followed.

- 3.4 Information regarding asbestos is available from the Area Manager Hard FM or their representative. The Area Manager Hard FM will also advise the need for a refurbishment survey depending on the proposed work(s), age of the premises and other relevant factors.
- 3.5 In general, any person who instructs work(s) that are intrusive to the fabric or fixtures of the premises is a duty-holder for the work(s) and must:
- determine whether, or not, asbestos is or could be present in the work area
 - commission a refurbishment survey where appropriate
 - act as the main point of contact with their contractors and provide the contractors, and any sub-contractors, with asbestos information together with details of the NHS Lothian asbestos procedures which will be given as part of the site induction.
 - ensure that all contractors understand the asbestos information provided, particularly where ACM's remain in the work(s) area, or in close proximity to it. (see Note below)
 - ensure any work undertaken by their contractors is carried out safely in respect of any ACM's within the work(s) area by assessing:
 - ❖ the risk assessment(s) and plan(s) of work/method statement(s) (RAMS) to confirm they are satisfactory and sufficient for the proposed contract
 - ❖ contractors' documentation such as training records, medical certificates, equipment certificates are valid
 - ❖ waste is disposed of appropriately
 - in the event of any damage to any ACM's or where a suspect material is encountered, this should be notified immediately to the Area Manager Hard FM, or their representative, who will arrange for remedial action(s) as necessary.

NOTE:

Where ACM's remain in the work(s) area, or in close proximity to it, the material(s) must be clearly identified and where possible an exclusion zone of 0.5m created.

Works must be carried out with a **high** degree of care within 0.5m of ACM's such as AIB (ceiling tiles, firebreaks, wall panels, etc), sprayed asbestos or thermal insulation. Additional protection of the asbestos during such close work should be considered as part of the risk assessment.

Any damage to asbestos or where suspect materials have been uncovered must be reported immediately to the contractors' NHS Lothian contact. In their absence, the Area Manager Hard FM should be contacted.

4 OPERATIONAL GUIDELINES

4.1 ASBESTOS MANAGEMENT

The responsibilities for asbestos management have been summarised in Table 1.

- 4.1.1 To manage the location, nature and type of all asbestos within NHS Lothian premises, the Head of Operations Hard FM will be responsible for ensuring that the Asbestos Registers in the Operational Areas are maintained up to date. The Register will, where appropriate, include non-asbestos materials whether, or not, they have been sampled or analysed.
- 4.1.2 The asbestos materials identified will be 'scored' as per the Material Assessment Algorithm (Appendix 5).
- 4.1.3 Until such time as all asbestos is removed, all asbestos materials in areas not routinely accessed by the public or patients will be identified by asbestos warning labels. In areas routinely accessed by public and patients, an appropriate label will identify asbestos materials. These labels will be positioned prominently.
- 4.1.4 During asbestos removal contracts not all asbestos may be removed, mainly as a result of limited access. Where this occurs, it will be agreed, in writing, with the person in charge of the project, the Area Manager Hard FM, the Asbestos Co-ordinator, the analyst and the removal contractor. On completion of the Certificate of Re-occupation, the analyst will record the exact location and details in a site note to all parties. Those materials remaining or the void concerned will be clearly identified by the use of encapsulant and permanent asbestos warning labels. The Asbestos Register will be amended to reflect the removal (partial or otherwise).
- 4.1.5 The Asbestos Registers are held in each Area Manager Hard FM possession (or delegated deputy) within the Facilities in electronic or paper format. Where work is undertaken, the Project Team should request the register for the area in which work is to be undertaken. For intrusive works, ie minor or major refurbishment, alteration or re-wiring projects, a refurbishment survey will be required. The manager for the project will ensure that the register is updated at the end of the project by passing on details of the materials removed and those that remain. Where materials are used which could appear to be an ACM, the location of these non-asbestos materials should also be given.
- 4.1.6 The register is a working document and should be consulted prior to any work being undertaken. If there is no asbestos information available, consult with Facilities before proceeding. If the presence of asbestos is indicated, contact the Facilities from whom advice will be provided

- 4.1.7 Health and Safety committee members will be advised of the location of the register and, if required, access to it can be arranged with Facilities.
- 4.1.8 The current information is held partly on CAD and partly paper copies. The Area Manager Hard FM will be responsible for ensuring that the Asbestos Register in their Operational Area is maintained up to date.
- 4.1.9 The register will be audited on an annual basis by re-inspection of the items held within it. Where significant damage is recorded by the audit/re-inspection, the relevant area may be subject to more frequent inspections as appropriate. The cause of the damage should be determined wherever possible by the auditor and/or the Estates Dept representative. Additional control measure(s) may be applied to similar ACM's such as additional labelling, protection, etc.
- 4.1.10 The audit report will be forwarded to the Head of Operations Hard FM for collating, with an action plan (if necessary), to ensure that asbestos risks are adequately managed.
- 4.1.11 All contractors working on NHS Lothian sites will be issued with a copy of the NHS Lothian Health & Safety Control of Contractors Policy and the Asbestos Policy and its associated procedures.
- 4.1.12 The Asbestos Register must be kept up-to-date by recording:
- ACM's which have been removed or other remedial action(s) taken
 - Analysis of suspect samples whether or not asbestos was present
 - ACM's remaining in a location following refurbishment or other remedial work(s)
- The Asbestos Co-ordinator is responsible for updating the Asbestos Register from information received from the person responsible for the work.
- 4.1.13 The Head of Operations Hard FM is responsible for the Asbestos Management Plan which is given in Appendix 11.

TABLE 1 ASBESTOS MANAGEMENT RESPONSIBILITIES

| ACTIVITY | ACTION | RESPONSIBLE PERSON/ DUTYHOLDER |
|--|---|---|
| Refurbishment or Demolition surveys | Following receipt of the Survey Report, issue copy to the Asbestos Co-ordinator | Person commissioning the work(s) |
| Asbestos removal or remedial work(s) | Following completion of the work, issue Asbestos Co-ordinator with Clearance Certificate(s) and any relevant information, including photographs, regarding the removal, remediation and/or ACM's remaining ACM's remaining must be clearly and permanently identified ² | Person commissioning the work(s) |
| Updating & Maintaining Asbestos Register | Following notification of any changes, ie removal(s), remediation, identification ¹ | Asbestos Co-ordinator |
| Re-inspection of ACM's | Monitor condition of known ACM's | Asbestos Co-ordinator |
| Incident involving ACM's (or suspect materials) | Report incident to Asbestos Co-ordinator | Person involved, Line Manager or other person responsible for the work or area involved |
| <p>NOTE:</p> <p>1 – where ACM's have been identified which were not in the Asbestos Register, these will be added only where they remain after the works have been completed or if such ACM's are potentially present on another floor of the building or another building of the same design, built at or around the same time</p> <p>2 – adhesive labels may not be suitable for permanent identification and should be securely fixed where used</p> | | |

4.2 SUSPECTED ASBESTOS

- 4.2.1 If a material or debris/dust is discovered which is thought to contain asbestos, the person discovering such should inform the Asbestos Co-ordinator. The emergency procedures, given in Section 4.9 and Appendix 2 should be applied where necessary.
- 4.2.2 The Asbestos Co-ordinator will arrange for a sample of the substance to be analysed by a UKAS Laboratory, following a safe retrieval by the Asbestos Co-ordinator, or an equivalent, accredited laboratory under the Asbestos Co-ordinator's direction.
- 4.2.3 The Asbestos Co-ordinator will inform the Area Manager Hard FM, the manager for the area concerned and any other parties involved of the discovery and, in due course, the results of the analysis.
- 4.2.4 In all circumstances it should be assumed that the material or debris/dust is asbestos until the results of the analysis are known and the nature of the material or debris/dust is established.
- 4.2.5 In some situations, the Asbestos Co-ordinator will arrange for air test(s) to be carried out in the affected area. The Asbestos Co-ordinator will inform the Area Manager Hard FM, the manager for the area concerned and any other parties involved of the results of the test(s).
- 4.2.6 All staff and contractors will be instructed, in writing, by the Area Manager Hard FM of the need to suspend work should any material be discovered which is thought to be asbestos. The Area Manager Hard FM will subsequently inform them of the results of the analysis. Work will then either
- recommence if no asbestos is present
 - be re-routed around the asbestos, or
 - be suspended until the asbestos has been removed.
- Other options relevant to the situation may be applied as appropriate.
- 4.2.7 Control measures are in place and will be implemented to ensure that all contractors are given information from the asbestos register prior to starting work. Where work is undertaken, the person responsible for the project must ensure that these measures are followed when they invite contractors on to the premises. The contractor must sign to confirm they have received the information (register, report, certificates, etc) from the Requisitioner.
- 4.2.8 Contract documents shall include an extract from the register, where applicable, and shall include sufficient detail to enable the contractor to deal with a situation. Contractors should refer to the procedure for dealing with

suspected asbestos if material, known or is thought to be asbestos, is discovered during the course of the contract.

4.3 MONITORING

- 4.3.1 The annual audit will monitor the condition of the asbestos, which is within NHS Lothian premises.
- 4.3.2 Where monitoring highlights that the substance is in poor condition, the immediate action should be to restrict access to the area, where possible or to have emergency repairs made. Facilities must be contacted by the auditor, verbally within 1 working day and, if requested, in writing within 3 working days. The auditor, in turn, will determine the most appropriate course of action.
- 4.3.3 Employees and Contractors MUST report, to the Facilities, any damage that occurs to material containing asbestos or suspected asbestos immediately.
- 4.3.4 The Head of Operations Hard FM will ensure that Area Managers keep records of all monitoring and analytical results.

4.4 ASBESTOS WORK – NHS LOTHIAN STAFF

- 4.4.1 Work by NHS Lothian employees in areas containing traces of asbestos must comply with all the relevant codes of practice/procedures. In the event of this being necessary, a risk assessment together with a full working procedure, utilising appropriate personal protective equipment (PPE), must be adopted. Appropriate training MUST also be given.
- 4.4.2 **NO WORK** of any kind shall be undertaken on licensable Asbestos Containing Materials by NHS Lothian Estates staff **EXCEPT** during an **emergency situation** where, for example, asbestos forms the insulating material around a service which must be accessed and therefore the requirements of para. 4.4.1 will apply.

Note: licensable materials include

- AIB products such as ceiling tiles, boards, etc
- Thermal insulation such as pipe or tank insulation
- Sprayed coatings

4.4.3 Where an NHS Lothian Estates employee is required to undertake emergency work involving asbestos materials, the following PPE must be worn:

- Disposable hooded coveralls, i.e. Kimberley-Clark or Tyvek Category III, type 5/6
- Disposable respirator (to EN149 FFP3PS standard), i.e. 3M's type 9332

4.4.4 On completion of the work the PPE will be placed in a polythene bag, sealed and returned to the designated area for removal/disposal by a licensed asbestos removal contractor.

4.4.5 All waste from these emergency works will be double-bagged (red, then clear) with appropriate asbestos warning labelling. The Term Asbestos Contractor will be contacted to uplift the waste.

4.4.6 For work on non-notifiable ACM's such as bitumen, floor tiles, mastics, etc, Appendix 4 lists the tasks which NHS Lothian staff can undertake. Before carrying out such tasks, the relevant Task Sheet and Risk Assessment should be read. The Task Sheet is available from the Asbestos Co-ordinator or the Area Manager Hard FM.

4.5 ASBESTOS REMOVAL & REMEDIATION

4.5.1 Prior to any asbestos removal or remediation (hereafter referred to as removal in this Section) works, the person managing the works (hereafter referred to as the Requisitioner, in this Section) will have commissioned a refurbishment (or demolition) survey of the area.

4.5.2 The Asbestos Co-ordinator will appoint the contractor to undertake the refurbishment/demolition survey. Where the contractor is not UKAS accredited, the Asbestos Co-ordinator must ensure that the contractor is suitable qualified and experienced to undertake such surveys.

4.5.3 Using this information, a Scope of Works for the removal will be prepared by the Requisitioner, who may be assisted by the Asbestos Co-ordinator and others, including the contractor. An outline Scope of Works is given in Appendix 7. The use of the Scope of Works process will be determined by the Requisitioner who may be assisted by the Asbestos Co-ordinator and others, including the contractor on the complexity of the job to be undertaken. This Scope can be modified and adapted to suit the specific work site but should include:

- Details of what is to be removed, i.e. type(s) & forms of asbestos, including any non-asbestos materials such as MMMF thermal insulation and extent of the ACM's
- Location(s) of the negative pressure units(s), hygiene (decontamination) unit, skip & welfare facilities and noise reduction for sensitive sites

- Service details for water, electricity and drainage, including isolation of smoke alarms
- Transit and access routes to/from enclosure, including stairs and lifts available and any time restrictions
- Proposed start dates and expected date of completion
- Any site hazards or other factors relevant to the work area and site-specific procedures, including potential access to the area by unauthorised or unprotected persons
- Arrangements for
 - ❖ removing equipment, records, office furniture
 - ❖ protecting or removing soft furnishings
- Plans and photographs, annotated as necessary
- NHS Lothian appointed analyst to carry out the issuing of the certificate of re-occupation, including any leak testing/personal monitoring arrangements
- NHS Lothian contact(s) details
- Any other relevant information

- 4.5.4 A licensed asbestos removal contractor will undertake all work involving asbestos removal which requires to be notified to the HSE.
- 4.5.5 A list of approved NHS Lothian asbestos contractors for removal, consultancy and air monitoring is given in Appendix 1. This list is reviewed on a 3 yearly basis or in the event of a serious incident or occurrence and the contractor(s) annually reviewed regarding their performance. Prior to appointment, the contractor will be asked to demonstrate knowledge of current legislation and good, safe working practices, together with a practical approach in occupied and complex buildings.
- 4.5.6 All licensed asbestos removal contractors will be required to undertake work in accordance with current legislation and guidance. On receipt of a Scope of Works, the contractor will be obliged to provide a Method Statement.
- 4.5.7 The Method Statement will be assessed by the Requisitioner together with the Asbestos Co-ordinator prior to the issue of the contract to ensure that the method described is correct for the ACM's identified and covers any site-specific issues.
- 4.5.8 Once the Method Statement acceptable, the contractor will be appointed by the Requisitioner and a mutually agreeable start date/time arranged. Thereafter, the contractor will notify the HSE together with a copy of the Method Statement. Prior to the contract commencing, all relevant parties, including the Requisitioner or their representative and the asbestos removal contractor will attend a pre-start meeting to ensure all logistics for the contract are in place.

- 4.5.9 Prior to the removal work commencing, the Requisitioner, Asbestos Co-ordinator or their representative will assess the asbestos removal contractor's site set-up, including the hygiene unit, negative pressure unit(s), transit routes, enclosure, etc., in accordance with the Scope of Works and the Method Statement. A record of such check(s) will be made using the form given in Appendix 8.
- 4.5.10 The Asbestos Co-ordinator will monitor the asbestos removal contractor's compliance to the Method Statement. In some instances, an independent UKAS accredited monitoring agency may be appointed in sensitive locations or on difficult contracts such as complex plant rooms.
- 4.5.11 The contractor **MUST** inform the Requisitioner assigned of any changes to the Method Statement and any difficulty being encountered in achieving the original plan. This must be stipulated within the contract. Any changes to the Method Statement must be agreed with the Requisitioner assigned, the Asbestos Co-ordinator, the analyst and contractor, as appropriate. Major changes **MUST** also be notified to the HSE before commencing.
- 4.5.12 The in-house Fire Advisers must be consulted if any work to be undertaken could restrict, in anyway, the means of escape in the event of fire. Alternative fire exits will be designated.
- 4.5.13 NHS Lothian will appoint a UKAS accredited analyst to carry out any air monitoring and site clearance work(s). In exceptional circumstances, where the asbestos removal contractor engages an analyst, this will only be with the agreement of the Requisitioner or the Asbestos Co-ordinator.
- 4.5.14 Prior to the contractor handing back the site to Facilities a 4-stage Certificate of Re-occupation certificate will be obtained from a UKAS accredited laboratory. This should be issued to the Requisitioner, or their representative, with a further copy issued to the contractor.
- 4.5.15 In some instances where a full decontamination is not undertaken, the area will undergo a visual inspection to the standards required by the current HSE Guidance Note HSG 248. Air monitoring will also be carried out as part of this exercise. In this instance, a visual inspection certificate and survey report or equivalent will be issued, as appropriate. The analyst, in conjunction with the Asbestos Co-ordinator, should advise the Requisitioner, or his representative, where and when this type of certification is appropriate. The manager for the area concerned and other such as contractors may need to be informed when this type of monitoring occurs, the reason(s) why and any limitations.
- 4.5.16 The procedures given in Appendix 2 should be followed, so far as is reasonably practicable in the event of an emergency occurring during asbestos removal.

4.5.17 Any issues regarding performance by the asbestos removal contractor or analyst during an asbestos removal contract should be dealt with by the Requisitioner and Asbestos Co-ordinator and involve the contractor at the time. Subsequently, a report will be issued to the Area Manager Hard FM for information, see also para. 4.5.21.

4.5.18 For minor issues, the contractor will be given a written report warning of the issue(s) and receive details of corrective actions or procedures to be applied on any future contracts.

4.5.19 For major issues, the contractor will be informed as for minor issues. In addition, the contractor may be supervised to a higher level or excluded from tendering for future contract(s) for an appropriate period of time.

4.5.20 On completion of the removal, or remedial, work(s), the Requisitioner will ensure they receive:

- Any air monitoring certificates, including the certificate of re-occupation
- Waste consignment notes
- Updated plans showing
 - ❖ those ACM's which have been removed
 - ❖ where ACM's do, or may, remain, including details of any identification

The Asbestos Co-ordinator will be given a copy of these documents and update the Asbestos Register accordingly.

4.5.21 The Asbestos Co-ordinator will check the asbestos removal contractor(s) and analytical company/ies documentation on an annual basis. When different contractors or companies are appointed, their documentation should be checked before appointment or as soon as practicable thereafter.

4.5.22 before, during and after a contract, the Requisitioner and/or the Asbestos Co-ordinator will undertake an assessment of the asbestos removal contractor(s) performance(s) on-site. The assessment will be recorded using the form given in Appendix 9.

If the performance is satisfactory, the asbestos removal contractor will be re-assessed again within 3 months. If no removal work is undertaken by that contractor within a 3 month period, a further assessment will be undertaken at the next available opportunity.

If the performance is unsatisfactory, or a specific issue is highlighted as being poor, the Requisitioner will be informed, in writing, by the assessor who in turn will notify the asbestos removal contractor.

NOTE: should the issue cause, or have the potential to cause, a high risk, it should be remedied immediately or the work stopped until it is deemed satisfactory.

A copy of the assessment will be issued to the Area Manager Hard FM for their information.

The asbestos removal contractor will submit written details of their remedial action(s) which will be agreed with the Asbestos Co-ordinator.

4.5.23 On completion of the removal works and receipt of the Certificate of Re-occupation, the Requisitioner will attend the site accompanied by the Asbestos Co-ordinator to confirm the work(s) have been completed as agreed and that the analyst has undertaken a satisfactory test of the site. This site visit will be recorded using the form given in Appendix 10.

4.6 INFORMATION FOR EMPLOYEES

4.6.1 All employees will be informed that asbestos is present on site, the method(s) of identification, where appropriate, and existence of the Asbestos Register as part of their induction training.

4.6.2 The Requisitioner and/or the Asbestos Co-ordinator will inform the manager for the area, and their staff, if asbestos work, under Section 4.5, is to be undertaken in or near their location of work.

4.7 INFORMATION, INSTRUCTION AND TRAINING

The training requirements for staff and contractors is given in Table 2. A summary of the topics covered in the training sessions is given in Table 3.

4.7.1 All Facilities staff shall be informed of areas containing asbestos during their site-specific induction and during 'Tool-Box' talks. Currently, 'tool-box' talks are given using the NHS Lothian Facilities package called MONTIE.

4.7.2 Staff required to enter an area, or to undertake work within an area, containing asbestos will be informed of the necessary precautions if the asbestos is found to be not in a sealed state and will be given adequate training on those precautions, in particular, in relation to the use of personal protective equipment.

4.7.3 All Facilities staff will attend an Asbestos Awareness course and annual refresher seminars

4.7.4 Separate refresher training courses in respect of tasks given in Section 4.4 will be held on an annual basis for both the Trades staff and Managers/Supervisors.

- 4.7.5 A record of attendance will be held by the Area Manager Hard FM and on the employee's personnel record. The Area Manager Hard FM should ensure ALL staff who could foreseeably come into contact with asbestos should attend
- 4.7.6 There is no requirement under current legislation for the course or training provider to be accredited to provide asbestos training. However, competent providers of information, instruction and training should have adequate practical experience in the asbestos sector and a theoretical knowledge of all relevant aspects of the work being carried out by the employee. It is the responsibility of the NHS Lothian to determine whether a training provider and the level of training given is suitable or not. The Asbestos Co-ordinator will make that assessment.
- 4.7.7 IT and Capital Projects and any other departments affected by this procedure should identify any staff (operatives and/or managers) requiring relevant asbestos awareness training and liaise with the Head of Operations Hard FM regarding the training provider and the training and/or information required. A Training Needs Analysis (TNA) may be completed prior to the training to ensure the adequacy and relevancy of the training and information delivered.
- 4.7.8 Different training will be provided for the different building users; the purpose being to provide the individual with the skills and information necessary to understand the hazards and risks involved when working, or managing work tasks or projects, in or near area(s) where ACM's have been identified.
- 4.7.9 The training topics (Table 3) may be changed as necessary. For example:
- the amount of time spent may be reduced for some topics with the additional time spent on more relevant topic(s)
 - other topics added such as changes to legislation or procedures

The topics covered and time spent on each should be agreed between the Asbestos Co-ordinator, the Area Manager Hard FM and the training provider.

TABLE 2 TRAINING

| Role | Training | | | | | |
|--|-----------|--------------------|---|----------------------------|---------------------|-----------|
| | | Asbestos awareness | | Non-licensed asbestos work | Asbestos Management | BOHS P405 |
| | | Induction | Refresher ³ (NHS Lothian) | | | |
| | Frequency | Site/ job specific | Annual | Annual | 3-yearly | N/A |
| Asbestos Co-ordinator | | | ✓ | ✓ | ✓ | ✓ |
| Area Managers Hard FM/ Capital Requisitioners | | | ✓ | ✓ | ✓ | |
| Maintenance Team Leaders | | | ✓ | ✓ | ✓ | |
| Maintenance team ¹ | | | ✓ | ✓ | | |
| IT/Telecoms/ other depts ⁴ | | | ✓ | | | |
| General/Specialist Contractors (non-asbestos) | | ✓ | ✓ ² | | | |
| <p>1 – selected individuals 2 – own in-house training 3 – on occasions, annual training may be missed; no more than 1 refresher training session should be missed 4 – a Training Needs Analysis may be required N/A – not applicable</p> | | | | | | |

TABLE 3 TRAINING TOPICS

| GROUP | TOPICS |
|--|--|
| Maintenance Team | <ul style="list-style-type: none"> • Properties of asbestos • Health effects • Avoiding the risks, including labelling & identification • Types & forms of asbestos • Legislation • Uses in general & in NHS Lothian premises (Asbestos Register) • Emergency procedures |
| Those who order, plan or supervise asbestos removal or remedial work(s) on-site | <ul style="list-style-type: none"> • Summary of asbestos types & forms; hazards & risks; health effects • Uses in general & in NHS Lothian premises • Legislation • Risk Assessments and Method Statements (Plan of Work) • NHS Lothian Asbestos Register <ul style="list-style-type: none"> ❖ Information held ❖ Updating the register • Refurbishment/demolition surveys <ul style="list-style-type: none"> ❖ Commissioning ❖ Limitations • Managing asbestos removal contracts • Site clearance & certificates or re-occupation |
| Asbestos Contractors ¹ | <ul style="list-style-type: none"> • Site induction |
| Other Contractors ¹ | <ul style="list-style-type: none"> • Site induction <ul style="list-style-type: none"> ❖ Summary of location(s) of known ACM's in work area ❖ Work permitted up to approx. 0.5m of ACM's ❖ Precautions to be taken if work is within 0.5m of ACM's ❖ Action to be taken where suspect material(s) is/are encountered ❖ Emergency procedures |
| Maintenance team – non-licensable tasks | <ul style="list-style-type: none"> • Safe working practice(s) <ul style="list-style-type: none"> ❖ Personal protective equipment ❖ Type H vacuum cleaners (where used) ❖ Work methods ❖ Cleaning area when finished • Waste handling & storage |
| <p>NOTE:</p> <p>1 - Provide copy/ies of annual asbestos training certificates to site contact</p> | |

4.8 PURCHASING

- 4.8.1 NHS Lothian has not knowingly used any asbestos containing material since 2000.
- 4.8.2 New, non-asbestos products such as non-asbestos corrugated cement, supalux, etc will be clearly identified, where they are of a similar appearance to an ACM, in a building old enough to potentially contained asbestos.
- 4.8.3 Where practical and easily identified, individual items such as gaskets will be logged and the information updated. Subsequently, if a gasket is not on the list, it must be assumed to be asbestos.

4.9 EMERGENCY PROCEDURES

- 4.9.1 In the event of an emergency such as a water leak, fire, vandalism, etc involving asbestos, Asbestos Co-ordinator and the Area Manager Hard FM for the area affected MUST be informed by telephone or e-mail as soon as possible. Contact details are given in Appendix 6. Where the emergency is part of a project managed by Capital Projects, the commissioning person MUST also be informed.
- 4.9.2 Out with normal working hours, the Estates on-call staff should be contacted via the switchboard
- 4.9.3 A representative from Hard FM, Capital Projects and/or the Asbestos Co-ordinator will then attend the site and decide on the appropriate course of action.
- 4.9.4 Guidance on appropriate actions are given in Appendix 2. Other action(s) relevant to the situation may also apply.
- 4.9.5 Where undertaken, on completion of any remedial work, Hard FM or the commissioning person will inform the managers for the contractors (in writing) and staff (verbally and/or in writing) that the area is suitable for normal access and remove any barriers, etc.
- 4.9.6 An investigation into the incident will be carried out by Hard FM or Capital Projects, together with the Asbestos Co-ordinator, to determine the cause. The report, findings and recommendations concerning the incident will be issued to the Head of Operations Hard FM for appropriate action.

4.10 ASBESTOS REASSESSMENT

- 4.10.1 The Asbestos Co-ordinator will undertake reassessment of the asbestos on an annual basis.
- 4.10.2 The report on the re-assessment including findings and recommendations will be issued to the Head of Operations Hard FM for action, as necessary.
- 4.10.3 Where the audit identifies asbestos in a poor or dangerous condition, this will be reported to the Area Manager Hard FM, verbally within 24hrs of the inspection and followed up in writing within 3 days. The Head of Operations Hard FM will also be notified in writing within the 3-day period.
- 4.10.4 The Asbestos Co-ordinator will update the Asbestos Register as soon as possible and confirm the update status to the Area Hard FM Manager when completed.

4.11 AUDIT

- 4.11.1 The Area Manager Hard FM will commission an audit of the management of asbestos on an annual basis.
- 4.11.2 The audit agenda is given in Appendix 3.

4.12 REVIEW

- 4.12.1 The Head of Operations Hard FM will review this procedure annually, and a report made available for the Health and Safety Officer and Director of Operations.

5 PROJECTS AND MINOR WORKS (Estates, Capital Projects, IT etc)

On receipt of

- A request for work within a building or site
- A commission
- An enquiry to carry out a feasibility survey
- Acceptance of a project by a design group
- A request to carry out a Minor Work

It is the responsibility of the nominated Project/Area Manager Hard FM to determine the scope of the works within the project and the degree of intrusion into the existing fabric of the building whether above, below and beside the planned works area.

Intrusive works includes but is not restricted to:

- Forming ducts, pipe chases, risers
- Demolition of partition walls
- Forming openings for doors, windows etc
- Removal of windows for repair or replacement
- Work within voids such as ceiling, floor, walls etc
- Altering or replacing fire doors
- Routing of cables, pipes etc through a building

After this has been determined the Area Manager Hard FM responsible for the site must be consulted

A refurbishment/demolition survey should be requested from the Asbestos Co-ordinator. They may undertake this survey themselves or appoint a UKAS-accredited laboratory on behalf of NHS Lothian for larger/complex survey areas.

The cost of this survey should be established before the survey is commissioned and the Client informed as necessary

When planning a survey, arrangements must be made for access to all areas within the work area. This may involve moving equipment to allow reasonable access eg. from stores or cupboards. For occupied areas such as wards this may have to be carried out in phases. A "walk-through" survey by the Requisitioner and surveyor is recommended and, for occupied areas, the timing of the survey discussed with the person in charge of the area concerned.

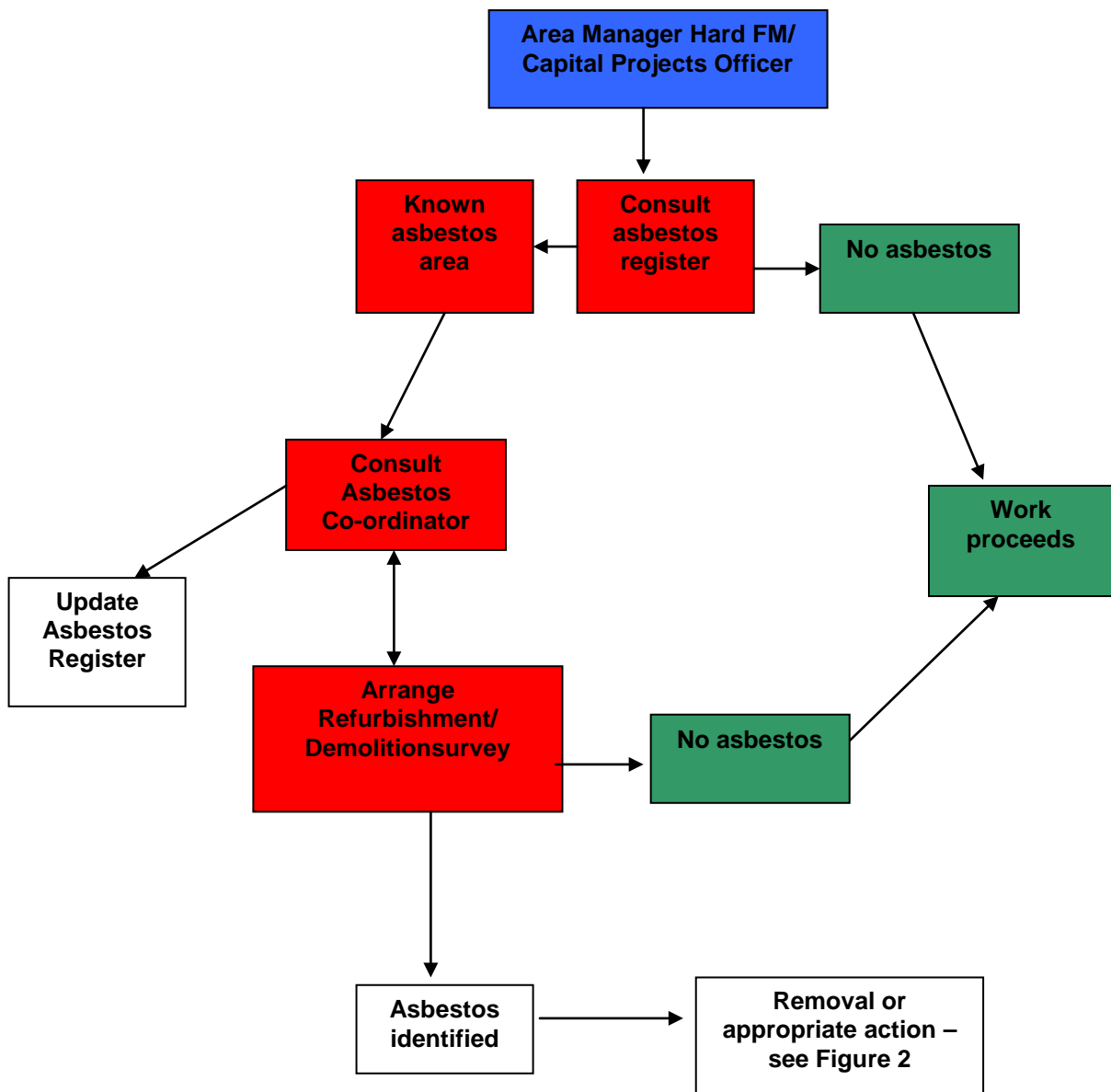
After the refurbishment/demolition survey has been reported as to the extent of the asbestos materials established, a Scope of Work should be prepared detailing the extent of the asbestos removal and other factors which will impinge on the work such as occupied areas, fire/transit routes, etc.

The Asbestos Removal Contractor should prepare a quotation for the work and a Method Statement based on the Scope of Work and if satisfactory, the Asbestos Removal Contractor should be appointed.

TABLE 4 Responsibility Chart

| | Action | Action by |
|---|--|--|
| 1 | A refurbishment/demolition survey should be requested | Projects/Area Manager |
| 2 | Contact Asbestos Co-ordinator and discuss remit. A walk-through site visit is advisable, to determine quietest time for access | Projects/Area Manager/Asbestos Co-ordinator/ person-in-charge |
| 3 | Inform Client of survey costs and when it will be carried out | Projects/Area Manager |
| 4 | Arrange clearance of rooms with occupier if necessary | Projects/Area Manager/Occupier |
| 5 | Building/Area surveyed and reported | Asbestos Co-ordinator/Surveyor |
| 6 | Prepare Scope of Work | Projects/Area Manager/Asbestos Co-ordinator |
| 6 | Obtain costs for any Asbestos removal or remediation (should include analytical costs) | Projects/Area Manager/Asbestos Co-ordinator |
| 7 | On completion of work, Requisitioner will be issued with copy/ies of any certification, including survey report if appropriate | Projects/Area Manager/Asbestos Co-ordinator |

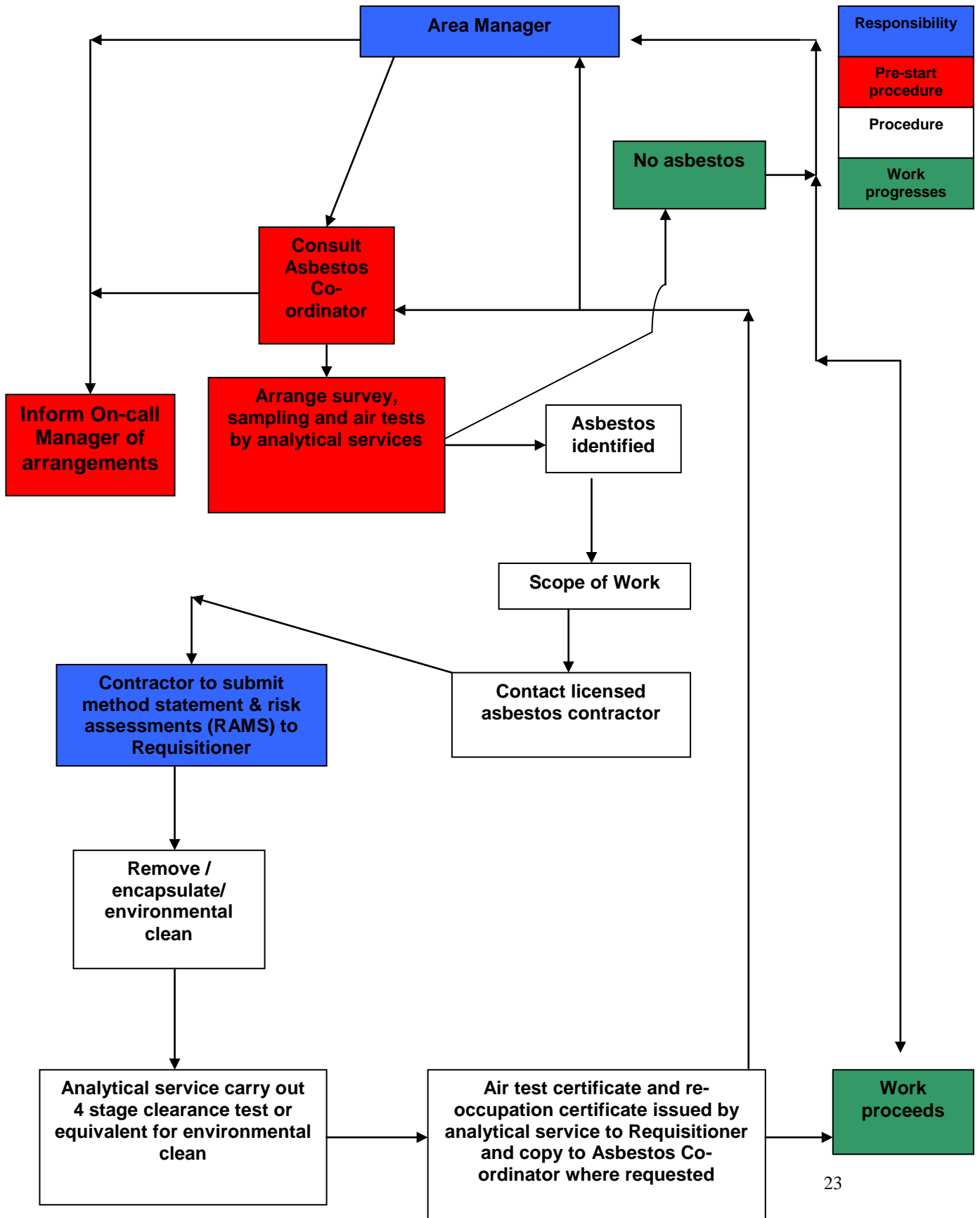
FIGURE 1 Flowchart of Controls required for Refurbishment/Demolition Surveys for Projects, Minor Works and Maintenance Contracts



| |
|---------------------|
| Responsibility |
| Pre-start procedure |
| Procedure |
| Work progresses |

FIGURE 2

Flowchart of Controls required for Asbestos Removals or Remedial Works Projects, Minor Works and Maintenance Contracts



APPENDICES

APPENDIX 1: ASBESTOS CONTRACTORS

A1.1 REMEDIATION (removal, encapsulation, repair)

Chamic Industrial Services Ltd
27 Bankhead drive
Edinburgh
EH11 4DN

Contact: Mr Scott Wood (Contracts Manager)
Office: 0131 453 4147

A1.2 CONSULTANCY (advice, surveys, material sampling)

Robertson Mcgregor Property Solutions Ltd
Linburn House
Unit 1
Station Road
Auchtermuchty
Fife
KY14 7DP

Contact: Mr Ian Mcgregor
Mobile: 07 944 331 542
Office: 01337 828167

e-mail: robertson.mcgregor@btconnect.com

A1.3 AIR MONITORING

Ethosenvironmental
Drumbryden Industrial Estate
Drumbryden Road
Edinburgh
EH14 2AB

Contact: Scott Carlin
Office: 0131 453 5111
E-mail: info@ask-ethos.co.uk

A1.5 ROLE of the ASBESTOS REMOVAL CONTRACTOR

Asbestos Removal Contractors shall be responsible for:

- Following and adhering to the NHS Lothian Control of Contractors Policy and any associated procedures
- Preparing an appropriate plan, method statement and risk assessment (RAMS) for removal of asbestos and submitting same to HSE for licensable work together with the Requisitioner and/or his representative
- Ensuring that their personnel are appropriately trained and are competent in Asbestos removal techniques
- Following accurately, drafted plans for setting up and controlling access to enclosures prior to removal operations which should also incorporate means of controlling air pressure within the enclosure
- Providing suitable decontamination accommodation for their staff
- Carry out background, leak and personal air monitoring as requested, before and during asbestos removal operations. On completion of operations undertake clearance testing and issue the 4-stage Certificate of Re-occupation to the Estates Operations Manager/Project Manager/NHS Lothian representative
- Removing waste asbestos to an approved disposal site
- Substitute or replacement staff should be designated in order to cover for sickness, holidays and staff transfers.

A1.6 ROLE of the ASBESTOS ANALYST

The asbestos analyst (UKAS accredited) will be responsible for:

- Carrying out background, leak and personal air monitoring as requested, before and during asbestos removal operations.
- On completion of operations undertake clearance testing and issue the 4-stage Certificate of Re-occupation to the Area Manager/Project Manager/NHS Lothian representative

APPENDIX 2: EMERGENCY OPERATIONAL PROCEDURES

KEY CONTACTS (List specific to each Operational Area)

Pan-Lothian Estates

Head of Operations Hard FM – Mr B Douglas

brian.douglas@nhslothian.scot.nhs.uk

Edinburgh – WGH, RVH, RHSC, Lauriston, Chalmers & PAEP Hospitals

Area Manager Hard FM – Mr P Christie

phil.christie@nhslothian.scot.nhs.uk

East & Midlothian Hospitals and Community Premises and ERI & Liberton Hospitals

Area Manager Hard FM – Mr K Glynn

kenny.glynn@nhslothian.scot.nhs.uk

Edinburgh – REH, AAH & Community Premises

Area Manager Hard FM – Mr N Lee

norman.lee@nhslothian.scot.nhs.uk

West Lothian – St John's Hospital & Community Premises

Area Manager Hard FM – Mr I Fleming

St Johns Hospital

ian.fleming@nhslothian.scot.nhs.uk

GENERAL EMERGENCIES

- A2.1 As quickly as possible, clear the area of all persons (this may be different in, say, a corridor compared with a ward or other occupied area)
- if the emergency is contained in a single area (such as a room), isolate room by closing the door. (For larger areas close all accesses). The word “close” means close securely to prevent or prohibit access by unauthorized persons;
 - if material is on personal clothing, ideally this should be removed until asbestos confirmed. Once confirmed the extent of contamination on personal clothing will determine if items should be disposed of or laundered.

These procedures are for guidance and may be adapted or modified for the specific area, event material involved and/or the extent.

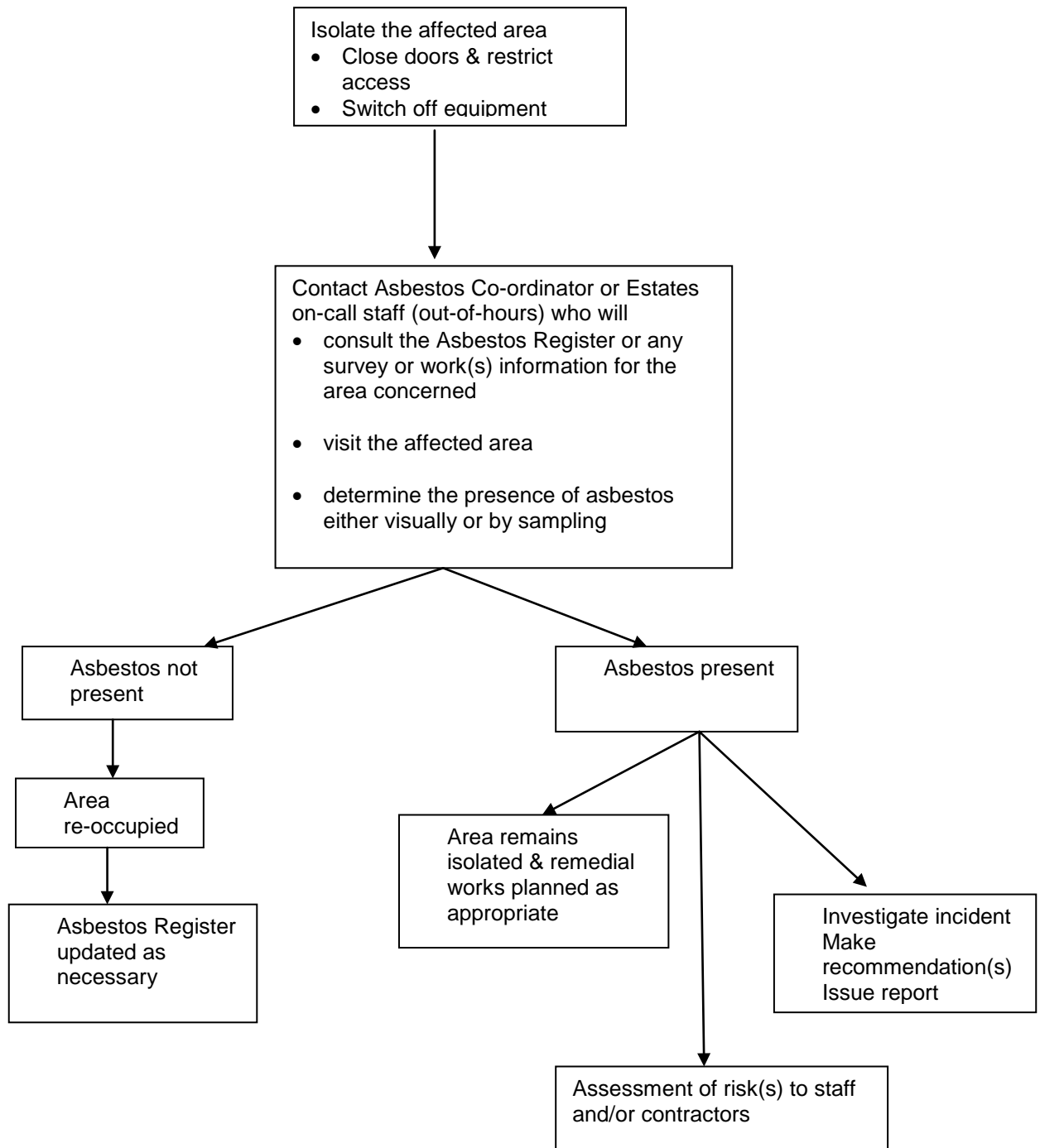
- A2.2 Inform the Asbestos Co-ordinator, manager or other responsible/nominated person as soon as possible.
- A2.3 The Asbestos Co-ordinator, manager or other responsible/nominated person will access the area, wearing appropriate PPE (depending on the emergency and what is involved, and assess/decide on the action(s) required:
- collect samples to determine if asbestos is present and extent of contamination;
 - dampen materials;
 - make area safe, i.e. turn off water, electrical supplies, equipment (this will be determined by the nature of the emergency);
 - decide if air monitoring is required or appropriate.
- A2.4 The Asbestos Co-ordinator, manager or other responsible person/nominated person will report to the Estates Office or other nominated persons/parties, etc.
- A2.5 If materials are confirmed as asbestos and the extent/scope determined, the Asbestos Co-ordinator, manager or other responsible/nominated person should arrange small scale removal of the material or contamination with nominated staff or contact an asbestos removal contractor for large (or small) area(s) of contamination.
- A2.6 For larger areas of contamination/damage, the “clean-up” may require notification to HSE together with a request for a waiver. In this instance the Area Manager or other responsible/nominated person, assisted by

the Asbestos Co-ordinator, will be required need to write an accompanying letter to explain why a waiver is required.

- A2.7 NHS Lothian Health & Safety Department will be informed. The Area Manager Hard FM with assistance from the Health & Safety Department will complete a RIDDOR form for each significant event or exposure. Note: HSE does not quantify “significant”. If in doubt, contact the Estates Manager or other responsible/nominated person such as the Asbestos Co-ordinator or Health & Safety Advisor for advice before reporting.
- A2.8 Once the area has been made safe and decontaminated, determine the cause/reason for the incident and what can be done to prevent a similar incident in future.
- A2.9 A significant/adverse event form, to be obtained from the Area Manager, must be completed and actioned as necessary, and forwarded to the Facilities within 2 working days, for inclusion on NHS Lothian’s Incident Reporting system, currently DATIX.

FIGURE 3

EMERGENCY PROCEDURES SUMMARY FLOW CHART



A2.10 EMERGENCY DURING ASBESTOS REMOVAL WORK

This Emergency Procedure has been prepared to provide guidelines in the event of an emergency occurring during asbestos removal.

The exact sequence of actions will, to a certain extent, be dictated by the nature of the emergency.

The Asbestos Removal Contractor must provide procedures for emergency procedures, as part of his overall method of work for the contract.

A2.10.1 FIRE

A2.10.1.1 inside Enclosure

- All operatives to evacuate the area as quickly as possible to an area of safety
- As it is unlikely that decontamination procedures will be followed, all operatives will be issued with a disposable coverall to put on over their working coveralls. The hood will be kept up. The respirator should be wiped down with a damp cloth.
- The Person-in Charge of Work will
 - inform the Fire & Rescue Services and Facilities immediately, detailing the nature, extent and location
 - raise the alarm and/or evacuate any rooms/offices in the immediate vicinity
 - count the number of personnel and ensure all operatives are accounted for
 - act as a liaison with the Fire & Rescue Service and the Estates Dept
 - inform the Fire & Rescue Service of the extent of the asbestos, depending on the stage of the contract
 - arrange for any electrical supplied to be disconnected, as appropriate
 - set up an asbestos exclusion zone, where the enclosure has been breached
- once all operatives are accounted for, they should follow normal decontamination procedures unless shower unit is affected by the fire. In this instance, alternative showering/decontamination arrangement should be made.

A2.10.1.2 Outside Enclosure

- The Person-in-Charge or 'outside man' should raise the alarm by using a Klaxon or air horn
- The Person-in-Charge of Work will:
 - count the number of personnel and ensure all operatives are accounted for
 - act as a liaison with the Fire & Rescue Service and the Estates Dept
 - inform the Fire & Rescue Service of the extent of the asbestos, depending on the stage of the contract, if the enclosure is likely to be affected by the fire
 - arrange for any electrical supplied to be disconnected, as appropriate
 - where Negative Pressure Units (NPU) are switched off, the airlock **MUST** be sealed
 - set up an asbestos exclusion zone, if appropriate

- once all operatives are accounted for, they should follow normal decontamination procedures unless shower unit is affected by the fire. In this instance, alternative showering/decontamination arrangements should be made.

A2.11 INJURY TO AN ASBESTOS REMOVAL CONTRACTOR OPERATIVE

The Person-in-Charge of Work will:

- determine the nature of the injury (if possible)
- contact the A&E department or emergency services and Facilities

A2.11.1 'Walking wounded'

If the injured person is able to walk or be helped, he should be removed from the enclosure. The immediate area outside the enclosure, at the point of egress, should be classed as a "Decontamination Zone". A polythene floor sheet should be set out and the zone demarcated using barrier tape.

The person(s) affected should be decontaminated as far as possible by removing suits and footwear and being wiped down using takrags or similar. The respirator, which should also be wiped down, should not be removed, except in an emergency, until the decontamination of the person(s) has been completed.

The Decontamination Zone should be sprayed with water/surfactant to keep fibre concentrations to a minimum during the decontamination process.

All waste from this decontamination exercise should be bagged for disposal as asbestos waste.

A2.11.2 Serious injury

Where the person is seriously injured and unable to be moved, the enclosure and asbestos materials should be kept damp using a spray of water/surfactant. Depending on the stage of the contract, polythene may be required on the floor to provide a route through the enclosure to avoid walking in asbestos debris.

The Person-in-Charge of Work should make available sufficient and suitable PPE to allow the emergency services access. An experienced operative should accompany the emergency services staff through the PPE procedure.

A2.11.3 Removal from enclosure

The wall of the enclosure should be slit to allow egress. The slit should be resealed immediately afterwards.

The immediate area outside the enclosure, at the point of egress, should be classed as a "Decontamination Zone". A polythene floor sheet should be set out and the zone demarcated using barrier tape.

The person(s) affected should be decontaminated as far as possible by removing suits and footwear and being wiped down using takrags or similar. The respirator, which should also be wiped down, should not be removed, except in an emergency, until the decontamination of the person(s) has been completed.

The Decontamination Zone should be sprayed with water/surfactant to keep fibre concentrations to a minimum during the decontamination process.

All waste from this decontamination exercise should be bagged for disposal as asbestos waste.

Thereafter, the injury should be attended to. The nature of the injury will dictate the level of decontamination and sequence of action(s) and the information given above should be applied as far as possible.

A2.11.4 Record of incident

A record of the incident and relevant details should be recorded in the Contractor's accident book. A significant/adverse event form, to be obtained from the Area Manager, must be completed and actioned as necessary, and forwarded to the Facilities within 2 working days, for inclusion on NHS Lothian's Incident Reporting system, currently DATIX.

A2.12 ELEVATED FIBRE CONCENTRATIONS

Before any asbestos removal work is undertaken, so far as is reasonably practicable, the appointed analyst will undertake background monitoring to establish airborne fibre concentrations. Where the concentrations exceed 0.010 f/ml, fibre discrimination by Phase Contrast Optical Microscopy (PCOM) or Scanning Electron Microscopy (SEM) may be undertaken to identify the fibres on the advice of the Asbestos Co-ordinator and/or analyst.

Elevated fibre concentrations are possible in some areas of hospitals etc. The fibres present could be from the blankets/soft furnishings or as a result of cleaning surfaces in the area concerned.

A2.12.1 Category 1

Where Leak Testing indicates that the airborne fibre concentration is <0.010 f/ml, work will continue. Should the airborne fibre concentration be >0.01f/ml and <0.02f/ml, the area should be kept under observation by additional air testing and an assessment of the enclosure/working area. In the event of observed potential area(s) of leakage from the enclosure, these should be repaired as necessary.

The frequency of air testing will be determined by the fibre concentration.

A2.12.2 Category 2

Where Leak Testing indicates that the fibre concentrations are 0.02 – 0.05 f/ml:

- The analyst should decide whether or not the fibres are or could be asbestos or organic in composition
- If organic, it is possible that the fibres are not from the enclosure and the investigation modified accordingly

- If considered to be asbestos, the analyst should inform the Contractor's Person-in-Charge of Work and work stopped pending investigation
- the analyst and The Person-in-Charge of Work should inspect the area concerned checking seals and other potential sources of leakage and repair, as required
- operatives inside enclosure should also inspect the internal seals and repair, as required
- if no source is found, the work should restart and short term leak testing started
- if fibre concentrations <0.010 f/ml, no further action other than to keep the situation under observation
- if fibre concentration >0.02 f/ml, work should stop and the external wall(s) of the enclosure should be subjected to a smoke test to determine the point(s) of leakage
- **(REMEMBER: SMOKE ALARM PROCEDURE)**
- work should not recommence until all parties are satisfied by outcome of investigation

A2.12.3 Category 3

Where Leak Testing indicates that the fibre concentrations are > 0.05 f/ml:

- The analyst should decide whether or not the fibres are or could be asbestos or organic in composition
- If organic, it is possible that the fibres are not from the enclosure and the investigation modified accordingly
- If considered to be asbestos, the analyst should inform the Contractor's Person-in-Charge of Work and work stopped pending investigation
- The analyst and/or Contractor's The Person-in-Charge of Work should inform the Estates Manager
- Access to the affected area should be restricted to authorised persons wearing disposable PPE
- Depending on the area concerned, evacuation of the area may be considered
- Air monitoring in the affected area should continue
- the operatives in the enclosure should dampen down all asbestos thoroughly
- the analyst and The Person-in-Charge of Work should inspect the area concerned checking seals and other potential sources of leakage and repair, as required, including the negative pressure unit(s)
- operatives inside enclosure should also inspect the internal seals and repair, as required
- if no source is found, the external wall(s) of the enclosure should be subjected to a smoke test to determine the point(s) of leakage **(REMEMBER: SMOKE ALARM PROCEDURE)**
- work should not recommence until all parties are satisfied by outcome of investigation and fibre concentrations have returned to normal
- close observation should be kept on the work when it is under Category 3 observation

APPENDIX 3 ASBESTOS AUDIT AGENDA

AUDIT AGENDA

- Asbestos procedures document
- Asbestos register
- New legislation and compliance
- Actions from previous audits
- Actions during previous year
- Monitoring records
 - Air monitoring
 - Records of actions from previous year
 - Bulk sampling
 - Inspection of asbestos
- Emergencies
 - Exposure of individuals
 - Causes
 - Findings
 - Recommendations/actions
- PPE stock
- Waste arrangements
- Information, instruction and training
- Staff interviews
 - Implementing the asbestos procedure
 - Codes of practice
 - PPE
 - Emergencies
 - Any other issues regarding asbestos
- Codes of practice
 - Staff
 - Contractors
- Specification for tender documentation to all contractors
- Actions for next year
- Any other business

APPENDIX 4 NON-LICENSED ASBESTOS REMOVAL TASKS

Work with asbestos cement (AC) (non-licensed)

- Cleaning debris from guttering on an asbestos cement roof
- Removing asbestos cement debris
- Repairing damaged asbestos cement using mastic or similar
- Removing asbestos cement sheets, gutters, etc. and dismantling a small asbestos cement structure
- Removing asbestos cement or reinforced plastic product eg tank, duct, water cistern
- Painting asbestos cement sheets using hand-sprayer

Removal and replacement of other asbestos containing materials

- Removing asbestos friction linings
- Removing an asbestos fire blanket complete with casing
- Removing asbestos-containing bituminous products
- Removing metal cladding lined with asbestos-containing bitumen
- Removing asbestos-containing floor tiles and mastic
- Removing flexible asbestos duct connectors (gaiters)
- Removing compressed asbestos fibre gaskets and asbestos rope seals
- Removing an asbestos-containing 'arc shield' from electrical switchgear
- Removing a single asbestos-containing gas or electric heater
- Replacing an asbestos-containing fuse box or single fuse assembly complete
- Removing asbestos-containing mastic, sealant, beading, filler, putty or fixing

Task Sheets and Risk Assessments are available from the Area Manager Hard FM and/or the Asbestos Co-ordinator for these tasks.

Appendix 5: Material assessment algorithm

| Sample variable | Score | Examples of scores (see notes for more detail) |
|--|-------|--|
| Product type (or debris from product) | 1 | Asbestos-reinforced composites (plastics, resins, mastics, roofing felts, vinyl floor tiles, semi-rigid paints or decorative finishes, asbestos cement etc). |
| | 2 | AIB, millboards, other low-density insulation boards, asbestos textiles, gaskets, ropes and woven textiles, asbestos paper and felt. |
| | 3 | Thermal insulation (eg pipe and boiler lagging), sprayed asbestos, loose asbestos, asbestos mattresses and packing. |
| Extent of damage/deterioration | 0 | Good condition: no visible damage. |
| | 1 | Low damage: a few scratches or surface marks, broken edges on boards, tiles etc. |
| | 2 | Medium damage: significant breakage of materials or several small areas where material has been damaged revealing loose asbestos fibres. |
| | 3 | High damage or delamination of materials, sprays and thermal insulation. Visible asbestos debris. |
| | 0 | Composite materials containing asbestos: reinforced plastics, resins, vinyl tiles. |
| | 1 | Enclosed sprays and lagging, AIB (with exposed face painted or encapsulated) asbestos cement sheets etc. |
| Surface treatment | 2 | Unsealed AIB, or encapsulated lagging and sprays. |
| | 3 | Unsealed lagging and sprays. |
| | 1 | Chrysotile. |
| Asbestos type | 2 | Amphibole asbestos excluding crocidolite |
| | 3 | Crocidolite. |

Score

10 or more

7-9

5-6.1.1

4 or less

Potential to release fibres

High

Medium

Low

Very Low

**APPENDIX 6
FORM TO CHECK ASBESTOS CONTRACTORS (REMOVAL & ANALYST)
DOCUMENTS**

A6.1 ASBESTOS REMOVAL CONTRACTORS DOCUMENTATION CHECKLIST

| DOCUMENT | CHECKLIST | SATISFACTORY (YES/NO) | ACTION REQUIRED (if any) |
|---|--|----------------------------------|-------------------------------------|
| Valid ASB5 Notification Form | Site details | | |
| | Details of work as per scope of work | | |
| | Contractor details | | |
| | Dates (start & completion) | | |
| | | | |
| Contractors Standard Procedures (SP) | SP folder present | | |
| | SP current | | |
| | | | |
| HSE Licence | Present | | |
| | | | |
| Insurance documents | ELSI certificate | | |
| | Public Liability | | |
| | | | |
| Site plant certificates <i>(check certificates & actual units)</i> | NPU(s) | | |
| | Vacuum(s) | | |
| | DCU - NPU | | |
| | DCU – Analyst certificate from previous contract | | |

| DOCUMENT | CHECKLIST | SATISFACTORY (YES/NO) | ACTION REQUIRED (if any) |
|--|-----------------------|----------------------------------|-------------------------------------|
| Employees certificates (for those employees on-site) | Medical(s) | | |
| | Training | | |
| | Face-fit for RPE | | |
| | | | |
| Method statement | Site specific | | |
| | | | |
| Risk assessments (site specific, where appropriate) | Noise | | |
| | COSHH | | |
| | Manual handling | | |
| | Live services | | |
| | Work at height | | |
| | Biological | | |
| | Chemical | | |
| | Radiation | | |
| | Sharps | | |
| | Hand/arm vibration | | |
| | Pressure system(s) | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Audited by: | | | Date |
| Print name | | | |
| Designation: | | | |

A6.2 ASBESTOS ANALYST DOCUMENTATION CHECKLIST

| DOCUMENT | CHECKLIST | SATISFACTORY (YES/NO) | ACTION REQUIRED (if any) |
|------------------------|------------------|--------------------------|-----------------------------|
| UKAS certificate | | | |
| | | | |
| Insurance documents | ELSI certificate | | |
| | Public Liability | | |
| | | | |
| Audited by: | | Date | |
| Print name | | | |
| Designation: | | | |

**APPENDIX 7
SCOPE OF WORK**

A7.1

| SCOPE OF WORK | | | |
|--|--|-------------------------------------|--|
| Contract title: | | Contract No: | |
| Scope of Work Prepared by: | | Date: | |
| Site: | | | |
| Location: | | | |
| Description of Work: | <i>(include details of what is to be removed, extent, non-asbestos materials, etc)</i> | | |
| Description of material & type of asbestos: | | | |
| Proposed start & completion date: | | | |
| Quotation to returned to: | | Quotation to be returned by: | |
| Analyst: | | | |
| Site Facilities | Decontamination Unit Store area, Mess area | | |
| Waste: | The waste skip will be located | | |

| | |
|--------------------------------------|--|
| Site record | Give details of site sign-in/sign-out arrangements |
| Site availability: | <p>The site will be available:</p> <p>Mon-fri: 07.30 – 18.00 or 18.00 – 07.30</p> <p>Sat/sun: 07.30 – 18.00 or 18.00 – 07.30</p> |
| Contract contact(s): | |
| NHS Lothian site preparation: | <p>Fire/smoke alarms</p> <p>Emergency exits/routes</p> <p>Electrical/gas isolations</p> <p>Ventilation isolation</p> <p>Timer devices, ie lighting</p> <p>IT equipment</p> <p>Barriers</p> <p>Site passes</p> <p>Permits</p> <p>Staff information</p> <p>Removal of office furniture & documentation</p> |

| Site Hazards | YES | NO | DETAILS* |
|--|--|----|----------|
| Fragile surfaces | | | |
| Electrical | | | |
| Gas (include medical gases) | | | |
| Radiation | | | |
| Biological | | | |
| Chemical | | | |
| Hot surfaces | | | |
| Cold environment | | | |
| Work at height | | | |
| Sensitive location | | | |
| Patients/staff | | | |
| Noise | | | |
| Lighting | | | |
| Dusts/mists/gases | | | |
| Guano (bird droppings) | | | |
| Slips/trips | | | |
| Wildlife (rats, birds, etc) | | | |
| Remote location(s) | | | |
| Heavy equipment | | | |
| Sharps (glass, needles, etc) | | | |
| External environmental factors (wind, rain, etc) | | | |
| | | | |
| | | | |
| OTHERS (Give details) | | | |
| | | | |
| | | | |
| | | | |
| * give details of precautions or control measures required to be taken by Client or Contractor to reduce risk(s) as appropriate | | | |
| Proposed programme | Start date/time: (include site set-up) Completion date/time: (include analyst time & site completion) Pre-start meeting: Progress meetings: | | |

PHOTOGRAPH(S)

NOTE: the contractor should verify all information contained within this remit

46

PLAN(S)

(indicate clearly work area, transit route(s), decontamination unit, skip, etc.)

NOTE: the contractor should verify all information contained within this remit

AMENDMENTS

(note any amendments to the Scope & agree with Contractor)

Amendments authorised by:
(for or on behalf of NHS Lothian)

Date:

Amendments agreed by:
(for or on behalf of Contractor)

Date

APPENDIX 8

A8.1 ASBESTOS REMOVAL CONTRACT PRE-START CHECKLIST

| DESCRIPTION | STATUS | ACTION STILL REQUIRED | ACTION COMPLETED |
|---|---------------|------------------------------|-------------------------|
| Site preparation | | | |
| Removal of office equipment, etc | | | |
| Isolations | | | |
| Gas | | | |
| Electric | | | |
| Fire/smoke alarms | | | |
| Passes | | | |
| Permits | | | |
| Staff notification | | | |
| Site barriers | | | |
| Site compound | | | |
| Skip area | | | |
| DCU area | | | |
| DCU services | | | |
| Electricity | | | |
| Water | | | |
| Drainage | | | |
| Start date agreed | | | |
| ASB5 Notification submitted by Contractor | | | |
| | | | |
| Audited by: | | Date | |
| Print name | | | |
| Designation: | | | |

NOTE: the contractor should verify all information contained within this remit

APPENDIX 9

ASBESTOS CONTRACTORS (REMOVAL & ANALYST) PERFORMANCE AUDIT

NOTE: the contractor should verify all information contained within this remit

50

A9.1 ASBESTOS REMOVAL CONTRACTORS PERFORMANCE ASSESSMENT

| DESCRIPTION | SATISFACTORY (YES/NO) | DETAILS | |
|--------------------------------------|--------------------------|---------|--|
| Construction & location of enclosure | | | |
| | | | |
| Documentation audit | | | |
| | | | |
| Work planning | | | |
| | | | |
| Start/completion dates as agreed | | | |
| | | | |
| Site personnel | | | |
| No of operatives | | | |
| | | | |
| Audited by: | | Date | |
| Print name | | | |
| Designation: | | | |

NOTE: the contractor should verify all information contained within this remit

A9.2 ASBESTOS ANALYTICAL CONTRACTORS PERFORMANCE ASSESSMENT

| DESCRIPTION | SATISFACTORY (YES/NO) | DETAILS | |
|---------------------------------------|--------------------------|---------|--|
| Attended site as per agreed timetable | | | |
| | | | |
| Informed of any site issues | | | |
| Smoke test | | | |
| Leakage from enclosure | | | |
| Standard of site clearance | | | |
| | | | |
| Certificates issued | | | |
| To nominated person | | | |
| Location details correct | | | |
| Issued within agreed timescale | | | |
| | | | |
| Audited by: | | Date | |
| Print name | | | |
| Designation: | | | |

NOTE: the contractor should verify all information contained within this remit

APPENDIX 10

ASBESTOS REMOVAL CONTRACT – WORK COMPLETED CHECKLIST

NOTE: the contractor should verify all information contained within this remit

53

A10.1 ASBESTOS REMOVAL CONTRACT – COMPLETION FORM

1. Asbestos Removal Contractor

a. Was work completed as per agreed remit YES/NO

If No, give brief details:

b. If completion was delayed, was the reason valid/acceptable YES/NO

If NO, what could be done to avoid delay(s) on future contracts

c. Was area left in satisfactory condition YES/NO
ie. All tape removed, no trailing cables, water leaks, etc
if NO, what needs done:

2. Analyst

a. Certificate of re-occupation received YES/NO

b. Surface check for dust/debris in awkward area, satisfactory YES/NO

If NOT, check additional area(s)

Remedial action by:
Asbestos Removal Contractor:

Analyst:

Area SATISFACTORY for re-occupation

SIGNED:

Date:

PRINT NAME

Designation:

NOTE: the contractor should verify all information contained within this remit

54

APPENDIX 11

ASBESTOS MANAGEMENT PLAN

Asbestos Management Action Plan – 2017/18

| Item | Issue | Action by | Target date | Actual completion |
|------------|--|-----------|-------------|-------------------|
| 1.0 | System of asbestos site management and control. | | | |
| 1.1 | Review the Asbestos Policy as an area wide policy issue document. | | | |
| 1.2 | Review 'Contractors Health & Safety Requirements – Code of Practice' handbook | | | |
| 1.3 | Professional Services Agreements | | | |
| 1.3.1 | Specialist Advisor – | | | |
| 1.3.2 | Licensed Asbestos Removal Contractor | | | |
| 1.3.3 | Analyst Services – | | | |
| 1.4 | Review standards for the labelling and identification of known asbestos containing materials in accordance with the Asbestos Policy and install standard signs purchased from Asbestos Term Contractor | | | |
| | | | | |
| 2.0 | Information, Instruction and Training (Including Refresher Training) | | | |
| 2.1 | Refresher awareness training | | | |
| 2.1.1 | Operatives/trades personnel | | | |
| 2.1.2 | Supervisors | | | |
| 2.1.3 | Managers | | | |
| 2.2 | Deliver Toolbox talks to staff to reinforce use of register. | | | |
| | | | | |
| 3.0 | Internal Systems | | | |
| 3.1 | Review annually, management control system for authorized works carried out in areas adjacent to those areas identified as containing asbestos materials. | | | |
| 3.2 | Review annually the staff Health & Safety Handbook. | | | |

NOTE: the contractor should verify all information contained within this remit

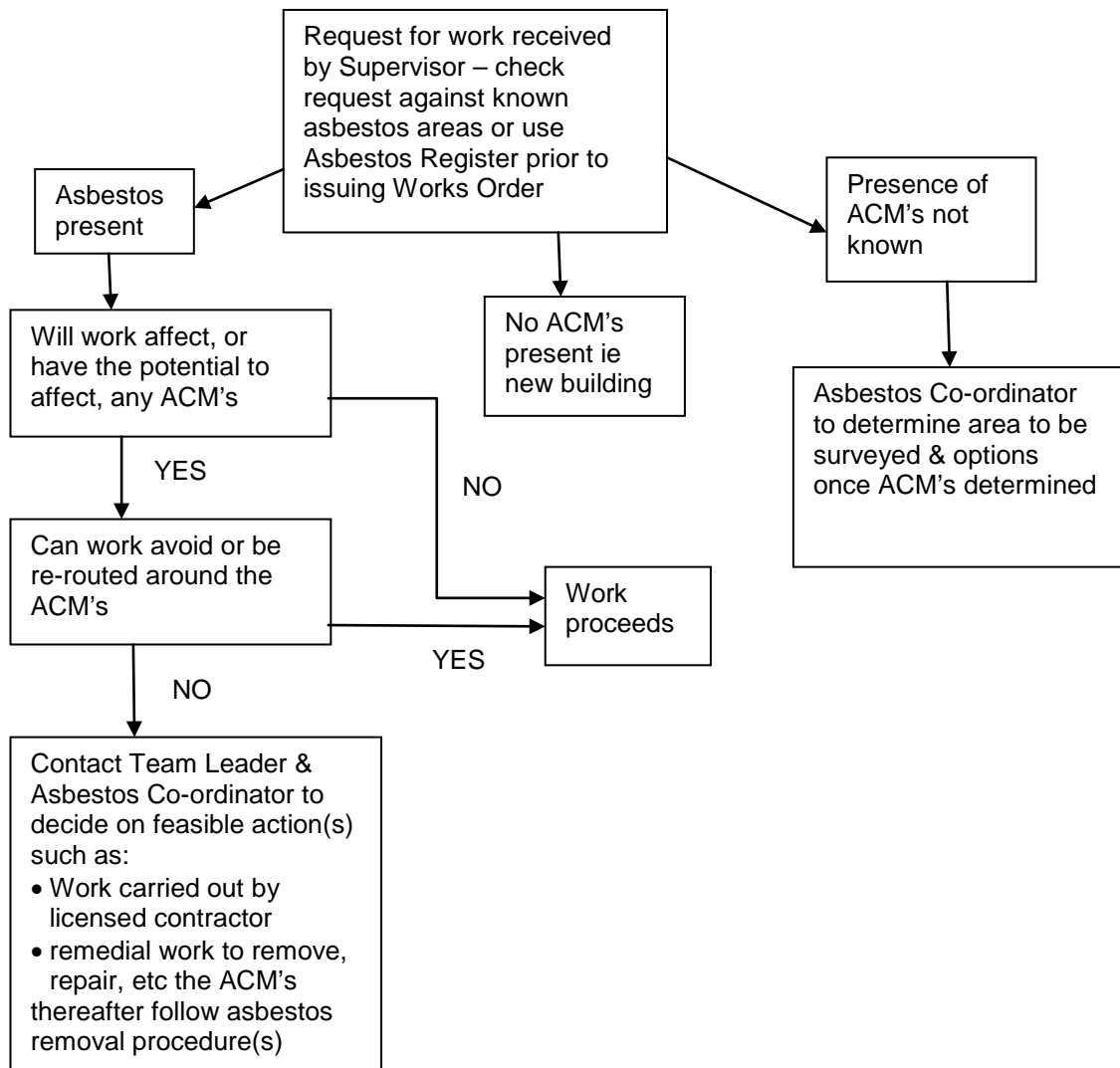
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| Item | Issue | Action by | Target date | Actual completion |
|-------------|--|------------------|--------------------|--------------------------|
| 3.3 | Update the staff Health & Safety Handbook and ensure amendments are issued to staff and recorded. | | | |
| 3.4 | Review Management of Contractors who access areas where asbestos may be present to ensure Operatives asbestos awareness. | | | |
| 3.5 | Review the Asbestos Register annually for accuracy of information. | | | |
| 3.6 | Update the Asbestos Register to ensure information system is accurately maintained. | | | |
| | | | | |
| 4.0 | Review Asbestos Condition | | | |
| 4.1 | Review Condition of known asbestos by carrying out PPM annual site inspection. | | | |

NOTE: the contractor should verify all information contained within this remit

APPENDIX 12

A12.1 SAFE SYSTEMS OF WORK – MAINTENANCE WORKS

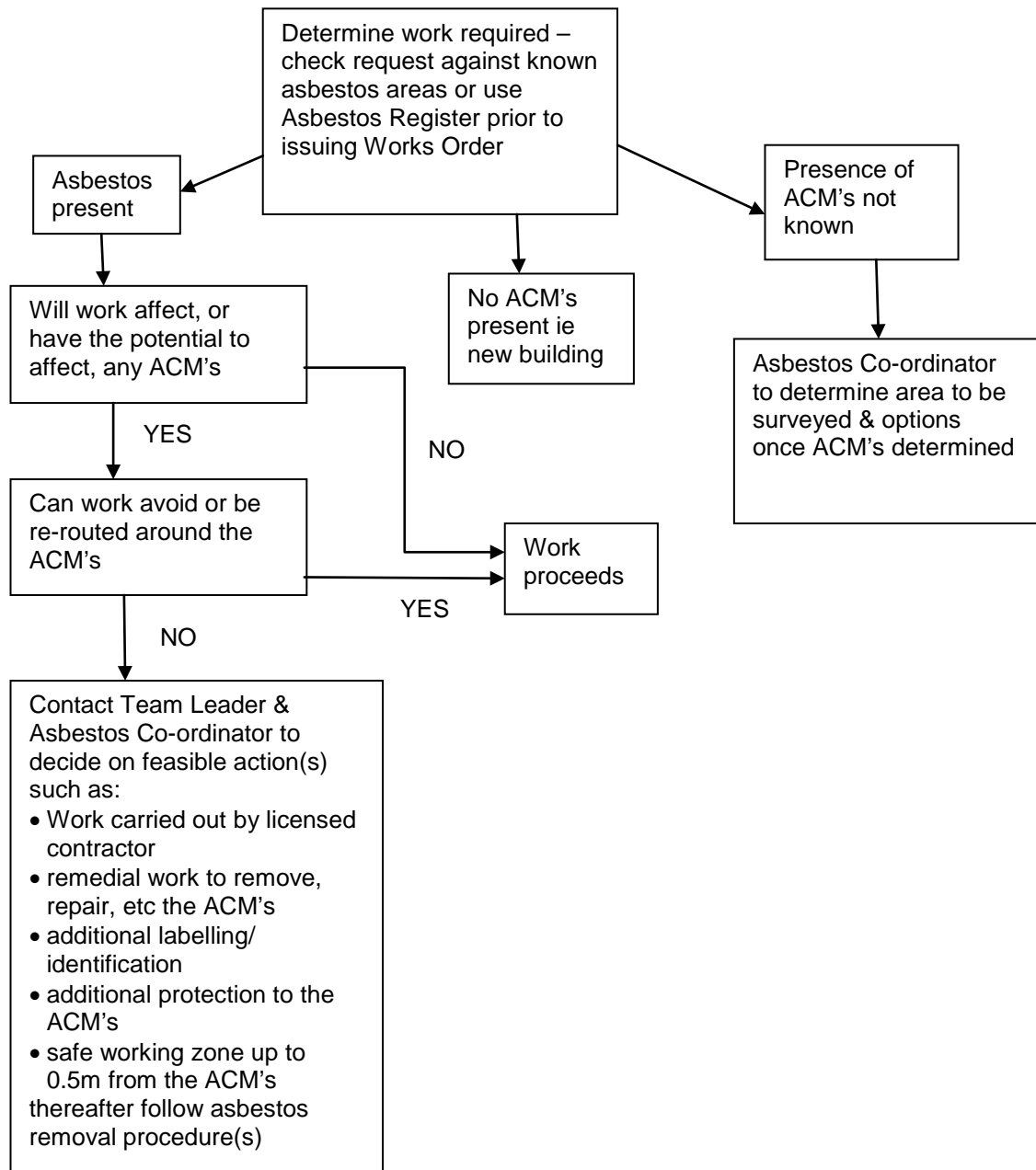


NOTE: the contractor should verify all information contained within this remit

57

APPENDIX 12

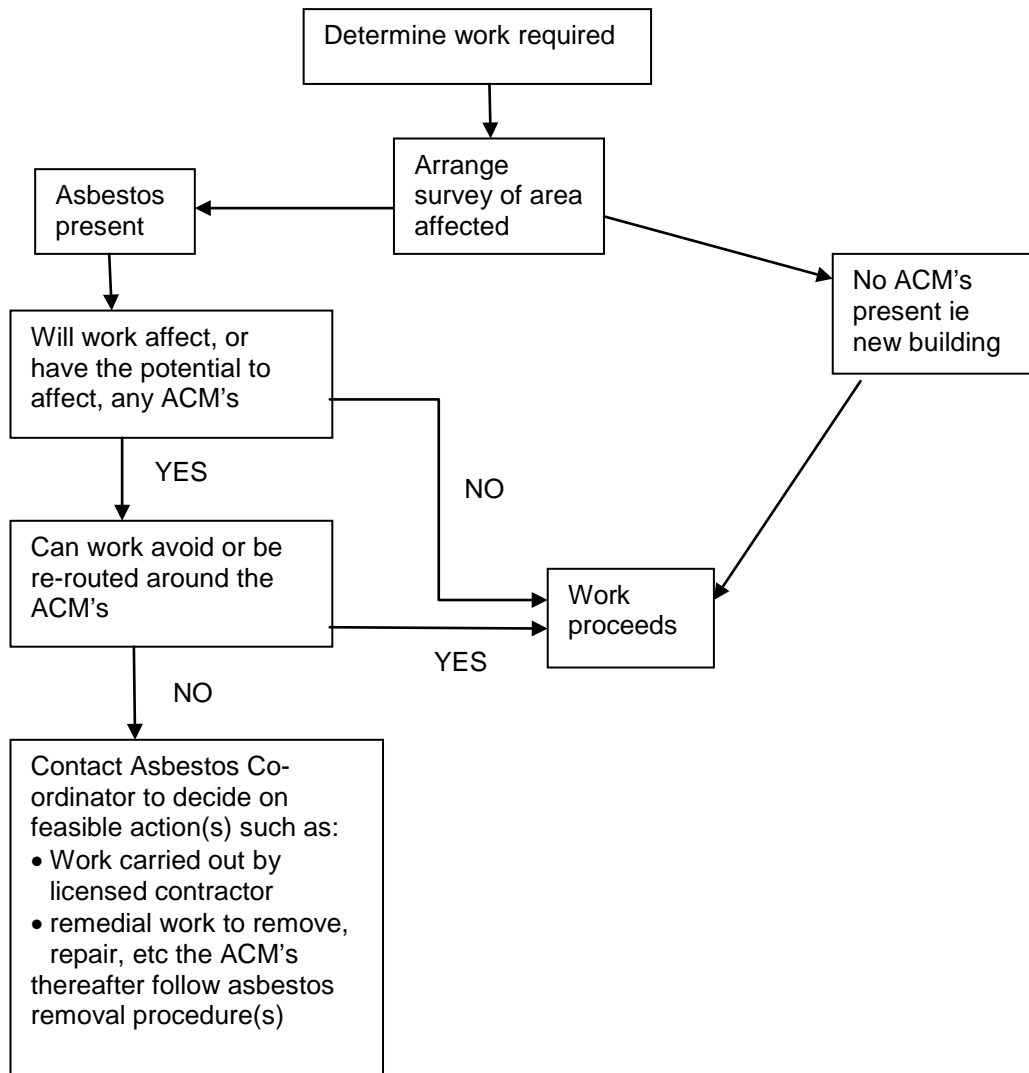
A12.2 SAFE SYSTEMS OF WORK – THIRD PARTY CONTRACTED WORKS



NOTE: the contractor should verify all information contained within this remit

58

A12.3 SAFE SYSTEMS OF WORK – CAPITAL PROJECTS, IT WORKS, etc



NOTE: the contractor should verify all information contained within this remit

APPENDIX 13 OTHER USEFUL INFORMATION

HSE publications

A comprehensive guide to managing asbestos in premises HSG227 HSE Books 2002 ISBN 978 0 7176 2381 5 www.hse.gov.uk/pubns/books/HSG227.htm

Asbestos: The survey guide HSG264 (Second edition) HSE Books 2012 ISBN 978 0 7176 6502 0 www.hse.gov.uk/pubns/books/HSG264.htm

Asbestos essentials: A task manual for building, maintenance and allied trades on non-licensed asbestos work HSG210 (Third edition) HSE Books 2012 ISBN 978 0 7176 6503 7 www.hse.gov.uk/pubns/books/HSG210.htm

Work with materials containing asbestos. Control of Asbestos Regulations 2012. Approved Code of Practice and guidance L143 HSE Books 2006 ISBN 978 0 7176 6618 8 www.hse.gov.uk/pubns/books/L143.htm

The management of asbestos in non-domestic premises. Regulation 4 of the Control of Asbestos at Work Regulations 2006. Approved Code of Practice and guidance L127 (Second edition) HSE Books 2006 ISBN 978 0 7176 6209 8 www.hse.gov.uk/pubns/books/L127.htm

Want construction work done safely? A quick guide for clients on the Construction (Design and Management) Regulations 2015 Leaflet INDG411(rev 1) HSE Books 2015 www.hse.gov.uk/pubns/indg411.pdf

Stationery Office publications

The Special Waste Amendment (Scotland) Regulations 2004 Scottish SI 2004/112 The Stationery Office 2004 ISBN 978 0 11 069030 8

Useful contacts

Asbestos Removals Contractors Association, Unit 1 Stretton Business Park, Brunel Drive, Stretton, Staffordshire DE13 0BY Tel: 01283 566467 www.arca.org.uk

Asbestos Control and Abatement Division, TICA House, 34 Allington Way, Yarm Road Business Park, Darlington DL1 4QB Tel: 01325 466704 www.tica-acad.co.uk

The Royal Institution of Chartered Surveyors, RICS HQ, Parliament Square, London, SW1P 3AD www.rics.org

United Kingdom Accreditation Service, 21–47 High Street, Feltham, Middlesex TW13 4UN Tel: 020 8917 8400 www.ukas.com

NOTE: the contractor should verify all information contained within this remit

60