



## **ASBESTOS MANAGEMENT GROUP**

Notes from the meeting held at 2pm. on Tuesday, 15<sup>th</sup> May 2012, in the Planning Room, Bordesley House, Heartlands Hospital

**PRESENT:** Mike Taylor (MT) Chair  
 Diane Aucott (DA)  
 Alan Brayley (AB)  
 Mike Keye (MK)  
 Dave Smith (DS)  
 Tony Wright (TW)  
 Gareth Gentles (GG) OHS

### **ACTION**

#### **1. Apologies**

- There were no apologies.

#### **2. Agenda items**

- MT discussed standing agenda items and said that he was open to any suggestions as to its content.
- DA suggested that there should be 'Incidents & Risk Assessments'.
- A report from GG was suggested to give an overview of work ongoing.

#### **3. Terms of Reference**

- The Terms of Reference were discussed with amendments to be made (see attachment 1, amended copy of Terms of Reference).
- MT said they would be ratified at the Statutory Compliance Group and then taken to the Safety Committee Meeting. DA said she would like to discuss this with Sarah Woolley first and would report back at the next meeting.

**DA**

#### **4. Action Log**

- It was decided that the RCA at GHH of asbestos release in March 2012 would be kept separately but would come through the group at a later date.
- It was agreed that all action would be captured within an "Action Log".

## SOP – Door Maintenance

- An SOP needed to be written. DA mentioned that Tony Cressey, Hotel Services had done a picture SOP and would be a good format to adopt. LA to speak to Tony and bring SOP to next meeting.

**LA**

## **5. Operational Reports**

### OHS Report

- GG circulated a 7 step knowledge chain which highlighted each process. He indicated that if the steps were followed then we will be compliant.
- At present GG is revisiting all areas to ascertain whether compliance is being covered and to identify any shortfalls.
- GG confirmed he would bring a progress report to the next and future meetings.
- GG said that any future Capital schemes will have to consider asbestos management. MT would speak to Mark Piggott and the Estates Development Department and get them to clarify what's been done on all schemes.
- It was discussed that contractors shouldn't be arranging their own asbestos surveys but should come through OHS, otherwise they cannot guarantee compliance.
- There needs to be proper direction for specification of asbestos removal.
- OHS will do the consultancy not the removal of the asbestos.

**GG**

**MT**

**ALL**

**ALL**

### GHH Operational Report

- Phase 1 and 2 are complete, and phase 3 is progressing well.
- IOSH have completed an assessment and an environmental clean will be implemented.
- Working with GG in high risk areas, this work is ongoing. GG will do an assessment on high risk areas which will probably require an environment clean. DS has asked GG to do a tender process. GG said that he could do a five week turnaround on all documents.
- DS had sent all documents required to HSE but had not heard anything since. He was waiting for further information from them.
- RCA had identified doors that had been worked on. GG said that you have to presume that any door has asbestos unless proved otherwise.
- DS advised that there were no ongoing works scheduled on doors pre 2000 until advice was taken, but that it was causing operational problems.
- Fire doors on the refurbishment of wards 8, 10 and 12 were being

replaced with new ones.

### SOL Operational Report

- MK said that door samples were being done at present. AB to let GG know the order number for the samples. **AB**
- AB/MK to send details of other buildings/renal that need to be tested to GG. **AB/MK**
- OHS had done re-inspections of the site and the information was now ready to be downloaded on to MICAD. **GG**

### BHH Operational Report

- OHS had done re-inspections of the site and the information/photos was in the process of been downloaded on to MICAD. **GG**
- Two high risk areas had been identified; block 42 Medical Records and Lincoln House basement. A tendering document was being drawn up by OHS. **GG**
- A quote had been received from GG for the surveying of the Chest Clinic.

MT agreed that funding needed to be available for surveys/ replacement of doors with asbestos.

GG to supply a quote for the sampling of 10 doors. **GG**

When refurbishing areas with asbestos then all asbestos needed to be removed and this needed to planned into the overall budget.

MT said that any work carried out needed a procedure that was followed and assurances given to this Group.

It was discussed that there were 18 other community areas that were occupied by Trust staff. GG suggested that the landlords needed to be contacted to ascertain whether they had carried out an asbestos survey.

MICAD is going to hold all the information as to where asbestos is located. Any schemes the Trust is currently working on where asbestos is found needs to be fed back into MICAD.

TW talked about an asbestos portal which is on Planet; When a location is put into the portal it will pull up a view of where asbestos is. It is mainly used for when contractors sign it at the supervisor's office.

6. **Training**

- MT stated that clearly a procedure needed to be written regarding doors pre 2000. It was said that there were HSE task sheets that deal with this.
- DS said that clarification and training was needed.
- TW said that we needed to be mindful because the policy says that estates staff are not allowed to do any work on asbestos.
- MT wanted himself, 3 Estates Managers and a deputy to be trained as competent. GG will get a costing and let MT know. **GG**
- Some training had been done at GHH and SOL and BHH was due in July.
- GG circulated a 'training needs analysis' which was discussed, and it was agreed that ½ day training of all Trust staff was unachievable. Mandatory training was mentioned but that there were always a large number of no shows. DA said that it was a legal obligation to notify staff that there is a risk of asbestos. MT said that he would have to take this forward and discuss with management. DA pointed out that we have to do what our policy says. If we say 'staff are going to be trained' then we will be in breach of our own policy if they don't attend training. GG would like to see a copy of the revised policy, DS to arrange. **MT**
- GG mentioned the option of seconding a dedicated trainer from OHS. GG will let MT know the cost. **DS**  
**GG**

7. **Any other business**

- DS had received grievances from the carpenters who are concerned. DS is going through the concerns and will write to them. DS will feed back at the next meeting. **DS**
- DS mentioned the issue of the firewall blocking the link between Planet fm and MICAD. MT said he would speak to Bob Anderson and try and get this resolved. **MT**

8. **Date and Time of Next Meeting:**

**Wednesday 20<sup>th</sup> June 2012 @ 2pm, Planning Room, Heartlands Hospital**