

SESLHD PROCEDURE COVER SHEET



Health
South Eastern Sydney
Local Health District

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KEY TERMS	Asbestos Management, Asbestos Containing Materials (ACM)
SUMMARY	This procedure specifies the District processes complying with legislation for the management of asbestos, and the requirements for managing potentially hazardous asbestos-related activities.

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

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1. POLICY STATEMENT

South Eastern Sydney Local Health District (SESLHD) acknowledges that due to the age of its facilities, some of the structures on its sites are likely to contain some asbestos or asbestos containing materials (ACM). SESLHD has an obligation to ensure that all asbestos and ACM are managed in accordance to legislative requirements.

2. BACKGROUND

Asbestos is a general term that covers the varieties of mineral silicates belonging to the serpentine and amphibole groups, with the most common types being crocidolite (blue asbestos), amosite (brown or grey asbestos) and chrysotile (white asbestos). Asbestos and asbestos containing materials (ACM) were used in a variety of domestic and commercial applications from the 1950s up until the mid-1980s. On 31 December 2003, the complete ban of the importation, manufacturing and use of asbestos and ACM came into force.

Asbestos material in a bonded form does not present an immediate health risk, if it remains undisturbed and in good condition. It is the inhalation of asbestos fibres or dusts generated by disturbing bonded material that may lead to the risk of asbestos related disease.

3. DEFINITIONS

3.1 Competent Person

A person considered competent in the knowledge and skills to identify asbestos, obtained through training, qualification or experience. Competent persons include:

- occupational hygienists who have experience with asbestos
- licensed asbestos assessors
- asbestos removal supervisors
- individuals who have a statement of attainment in the unit competency for asbestos assessors
- a person working for an organisation accredited by NATA under AS/NZS ISO/IEC 17020:2000 *General criteria for the operation of various types of bodies performing inspection for surveying asbestos*

3.2 Designated Responsible Person

An employee of a SESLHD Facility or site who has been designated with the responsibility for maintaining the Facility Asbestos Register and Asbestos Management Plan. This person is usually also the Facility contact person for matters relating to asbestos ([Section 5.14](#)).

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4. RESPONSIBILITIES

- 4.1 District Managers/ Service Managers will:** establish and maintain Health Safety and Wellbeing procedures to meet the WHS policy objectives
- 4.2 Line Managers will:** implement and comply with Health Safety and Wellbeing procedures to meet the WHS policy objectives
- 4.3 Workers will:** comply with Health Safety and Wellbeing procedures; and established workplace systems or measures to protect health safety and wellbeing in the work environment.

5. PROCEDURE

5.1 General Principles

South Eastern Sydney Local Health District (SESLHD) minimises the risks of asbestos to SESLHD workers and visitors to workplaces by:

- Providing nationally recognised Asbestos Awareness training through an RTO to all Engineering workers
- Outsourcing asbestos removal to a competent person who has received nationally recognised training and is certified to remove asbestos
- Periodically engaging a competent person ([Appendix 1 - Current competent person engaged by SESLHD](#)) to conduct a survey of all sites and facilities. The competent person will provide a report which will form the basis of each Facility's Asbestos Register and Management Plan. Each Facility must maintain an up-to-date Asbestos Register and develop and comply with their Asbestos Management Plan.

5.2 Consultation

Consultation with workers occurs throughout the survey process, and includes information sharing. The process includes identification and inspection, evaluation and control outcomes.

5.3 Identification and inspection

Each SESLHD Facility must ensure, as far as is reasonably practicable, that all asbestos or ACM at the workplace is identified and inspected by a competent person or assume the presence of asbestos or ACM.

An inspection of the Facility for asbestos and ACM by a competent person must occur:

- at least every five years, or
- before any work affecting the asbestos management plan is undertaken, or
- when any disturbance of the environment or buildings uncovers potentially or previously unidentified asbestos or ACM.

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5.4 Assessment

All buildings and structures constructed and/or refurbished prior to December 2003 are assessed by the competent person. The assessment report includes the following:

- the sources of asbestos and ACM
- the condition of the asbestos or ACM
- the likelihood of exposure and potential health risks
- the nature and location of any work that may be carried out that would disturb the asbestos or ACM

The assessment report informs the Facility Asbestos Register and Management Plan.

5.5 Register

An asbestos register as described in the requirements of the WHS Regulations 2017 is maintained by a designated responsible person at each SESLHD Facility and includes the following mandatory requirements as a minimum:

- the date the register was last reviewed and/or updated by a competent person
- the type of material, including a sufficient description for identification
- the condition of the material
- the location of all asbestos and asbestos-containing material.

The Facility ensures the register is accessible to the workers at the site.

5.6 Revision of the Asbestos Register

The register is reviewed at least once every five years by the competent person. The competent person conducts a visual inspection of the asbestos and ACM listed within the register to determine its condition and to revise the asbestos register as appropriate.

An update of the asbestos register is also required:

- if more asbestos is identified on the site
- after work affecting the asbestos management plan has been undertaken
- after completing demolition or refurbishment works where asbestos has been removed as part of the project.

5.7 Management Plan

The Asbestos Management Plan documents the Facility's responsible persons and arrangements for:

- engaging the competent person
- the frequency of visual inspections
- conducting the risk assessment
- implementing appropriate control measures based on the risk assessment
- labelling of all identifiable asbestos or ACM and recording the findings in the register
- signage and placarding of areas where asbestos or ACM are identified
- ensuring adequate consultation is included in each part of the asbestos management plan
- the removal of asbestos or ACM
- assessment prior to commencing demolition or refurbishment works.

The management plan is reviewed at least every five years.

5.8 Control indicators for asbestos containing materials

The following hierarchy of controls will aid the control of identified asbestos containing materials:

1. Elimination or removal
2. Isolation, enclosure or sealing
3. Engineering controls
4. Safe work practices (administrative controls)
5. Personal protective equipment (least preferred)

A combination of the above controls may be utilised. The general principles for controlling asbestos are:

- Remove: Unstable asbestos or ACM that is prone to damage (this must only be done by a licence qualified and competently trained person)
- Enclose: Stable asbestos or ACM that may be prone to damage and where encapsulation or sealing does not provide sufficient protection or may disturb asbestos fibres. May be suitable if removal is not a viable option
- Encapsulate/Seal: Stable asbestos or ACM that may be prone to damage & require protection of exposed surfaces. Not to be used if the surface coating will create significant disturbance of asbestos fibres.

Leave and maintain: Stable asbestos or ACM that is not prone to damage.

The goal when controlling asbestos is firstly to remove it. Where this is not reasonably practicable and the risk assessment determines that it cannot be left as is, lower order controls such as enclosure or encapsulation are implemented. However, it is important that the short and long term costs of control are considered before a control measure is implemented. For example, enclosure of friable asbestos in concrete will, in the short term control the risk of exposure to asbestos but will, in the long term incur additional costs as when it is finally removed the concrete as well as the friable asbestos will need to be disposed of by a licenced asbestos contractor.

5.9 Information, Instruction and Training

5.9.1 SESLHD Workers

10675NAT Asbestos Awareness training is provided, by a certified Registered Training Organisation (RTO) to all SESLHD Engineering workers who may come into contact with Asbestos.

5.9.2 Asbestos Removal Contractors

Contractors engaged by SESLHD to remove Asbestos have completed the relevant Asbestos Removal Training, provided by an RTO:

- Remove non-friable asbestos (Class B) CPCPCDE3014A
- Supervise asbestos removal CPCPCBC4051A
- Conduct Asbestos Assessment Assoc. Removal CPCPCBC5014A
- Remove Friable Asbestos CPCPCDE3015A.

5.10 Potentially Hazardous Processes

There are a variety of maintenance and service work processes that have the potential to disturb asbestos containing materials. These include any process that is likely release asbestos fibres such as:

- Removal of asbestos or ACM
- Drilling of asbestos or ACM
- Sealing, painting and cleaning asbestos cement products
- Cleaning gutters on asbestos cement roofs
- Handling asbestos cement conduits or boxes
- Working on electrical mounting boards containing asbestos.

Consultation of the asbestos register is required prior to commencing any work in areas where asbestos or ACM are known or suspected (e.g. buildings constructed before 31 Dec 2003). The SafeWork NSW Code of Practice [“How to manage and control asbestos in the workplace”](#) includes a recommendation of a permit-to-work system and appendices detailing specific safe work practices for working with asbestos. The SafeWork NSW Code of Practice [“How to safely remove asbestos”](#) includes detail of the licensing requirements for workers engaged in removing asbestos.

5.11 Exposure Monitoring

If respirable airborne fibres are suspected or identified, air monitoring may be required. This requires consultation with a competent person who may request an Occupational Hygienist or Licence Asbestos Assessor to take a sample measurement of the air quality within the workers' breathing zone. This sample is sent for analysis by an approved laboratory to assess the sample against the exposure standard. The result may require (as guided by the hygienist or competent person) the use of PPE including respiratory protective equipment. Where necessary, work may be stopped to assess and mitigate the cause of the airborne asbestos level before continuing on.

If test results suggest workers have contracted disease related to asbestos exposure, SafeWork NSW is notified. A report of the action the PCBU has taken in response to the findings is also supplied to SafeWork.

5.12 Warning Signs and Labels

All warning signs and labels must comply with AS1319 – “Safety Signs for the Occupational Environment”

Examples of signs and labels are included in the SafeWork NSW Code of Practice for [“How to manage and control asbestos in the workplace”](#) in Appendix B. The wording may vary in accordance with AS1319. The positioning of these must be determined by the competent person and adhere with the asbestos management plan, and placed in positions that provide the necessary identification and information required to prevent

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inadvertent disruption to the asbestos or ACM e.g. at access points to ceilings or next to valves where asbestos has been used as pipe lagging.

5.13 Health Surveillance

Any exposure or potential exposure is reported in IMS+ and injury notification form. For individuals who have been potentially exposed, SESLHD will arrange for an appropriate personal health surveillance where required, which usually includes a chest x-ray. Detail of any potential exposures will be kept on workers' personal staff records. Workers who have been exposed must be registered with the NSW Asbestos Register within three months of the exposure.

The facility also maintains a register in TRIM of people who are known to have been exposed to asbestos. This register includes:

- Name of exposed worker
- Staff number
- Details of the exposure
- Date of the exposure
- Date of the investigation.

For further information please refer to [SESLHDPR/378 Work Health and Safety – Health Monitoring for Occupational Health Exposures other than Infectious Diseases Procedures](#)

5.14 Facility Contacts/Responsible Persons

Further information on Facility Asbestos Registers and Management Plans can be obtained by contacting the following responsible persons:

- Sydney/Sydney Eye Hospital – Assistant Engineer
- Prince of Wales Hospital and Royal Hospital for Women – Chief Engineer
- St George Hospital – Engineering Manager
- Sutherland Hospital – Maintenance Manager
- Garrawarra Centre – Business Quality Manager
- War Memorial Hospital – WHS Coordinator and Maintenance Manager
- Calvary Health Care – Manager Corporate Governance and Compliance
- Facility and SESLHD Health Safety and Wellbeing Team.

6. RECORDS and DOCUMENTATION

Records are kept of any work performed on asbestos or ACM and includes the following:

- Details and scope of the work performed
- Names of those performing the work
- Date or dates of the work
- Include copies of any clearance certificates or permits
- Records of visual inspections

The following documents are also required at sites with asbestos and sites where there is a possibility that asbestos is present:

- Site asbestos audit
- Site asbestos register

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- Site asbestos management plan
- Asbestos monitoring
- Clearance certificate.

Health surveillance records for workers are maintained in Content Manager and kept for a period of 40 years. The worker is also be provided with a copy.

All other asbestos records are maintained and retained for at least 5 years, or if a notifiable incident has occurred for 40 years.

7. AUDIT

Scheduled Site Asbestos Audits
Health Safety and Wellbeing WHS Audits
ACHS Accreditation

8. REFERENCES

Ministry of Health

- [PD2016_017 Work Health and Safety Audits](#)
- [PD2013_050 Work Health and Safety: Better Practice Procedures](#)

Internal

- [SESLHDPR/378 Work Health and Safety – Health Monitoring for Occupational Health Exposures other than Infectious Diseases Procedures](#)

External

- [NSW Work Health Safety Act 2011](#)
- [NSW Work Health Safety Regulations 2017](#)
- [SafeWork NSW Code of Practice - How to manage and control asbestos in the workplace](#)
- [Code of Practice “How to safely remove asbestos” 2019](#)

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9. REVISION AND APPROVAL HISTORY *(state the author of the document, the date it was written, its revision number and approval history)*

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Aug 12	0	Manager Workforce Safety Injury Management Peggy Pollock
Nov 2013	1	Revised by Peter Kuszelyk, WHS Consultant, Health Safety & Wellbeing. Re-formatted by Scarlette Acevedo, District Policy Officer.
Jan 2015	2	Revised by Ron Taylor, WHS Consultant and Peggy Pollock, Manager, Health Safety and Wellbeing
July 2015	3	Reviewed and endorsed by Executive Sponsor
August 2017	4	Desktop Revision and Links Update - John Parkinson, WHS Consultant
October 2017	4	Updates endorsed by Executive Sponsor
August 2018	5	Document title changed – Catherine Johnson, WHS Consultant
December 2019	6	Updated links. Updated Executive sponsor, Position responsible for document and Author of document.
June 2020	7	Minor review - updates to links, wording and titles – Jen Hartley and Emma Huang Health Safety Wellbeing Advisors. Approved by Executive Sponsor
August 2020	7	Received by Executive Services and processed prior to publishing.

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APPENDIX 1 - Current competent person engaged by SESLHD

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