

## **ASBESTOS MANAGEMENT GROUP**

Notes from the meeting held on Tuesday 29<sup>th</sup> January 2013 @ 2pm, in the Planning Room, Bordesley House, Heartlands Hospital

**PRESENT:** Mike Taylor (MJT) Chair  
Diane Aucott (DA)  
Andy Green (AG)  
Mike Keye (MK)  
Nick Rudge (NR)  
Dave Smith (DS)  
Tony Wright (TW)  
Gareth Gentles (GG) OHS

		<b><u>ACTION</u></b>
<b>1.</b>	<p><b>Apologies</b></p> <p>Apologies were received from Robert Davey, Jim Fitzgerald and Ann Wilson.</p> <p>➤ MJT advised that he would be raising the issue of the non attendance of Occupational Health to the meetings at the next Statutory Compliance meeting on the 31<sup>st</sup> January 2013. He reiterated that it was vital that this Group was supported by OH.</p>	
<b>2.</b>	<p>Notes of previous meeting dated 6<sup>th</sup> December 2012</p> <p>The notes of the previous meeting were approved as a true record.</p>	
<b>3.</b>	<p>Actions from the previous meeting dated 6<sup>th</sup> December 2012</p>	
<b>3.1</b>	<p><u>Uploading data onto MICAD</u></p> <p>➤ DS advised that there were still areas of GHH that were not on MICAD. Adrian Cook (AC) was meeting with DS the next day to discuss a way forward. DS to update at the next meeting.</p> <p>➤ GG mentioned that not everyone had the same access to MICAD and that AC was looking into it.</p> <p>➤ MJT said that AC would be invited to the next meeting. LA to arrange.</p>	<p><b>DS</b></p> <p><b>LA</b></p>
<b>3.2</b>	<p><u>MICAD / PLANET links</u></p> <p>➤ DS has now been informed by PLANET that a bug in the system was preventing a warning being printed out onto work dockets in PLANET. There was no release date as yet for the new version. DS confirmed that PLANET understood the urgency and that Dave Hextall from IT was also involved.</p>	

	<ul style="list-style-type: none"> <li>➤ DS to update at the next meeting.</li> <li>➤ DS/TW mentioned that they were concerned that not all the data put on the system by OHS was being transferred onto MICAD. TW &amp; GG to talk outside of the meeting.</li> <li>➤ TW to give an update at the next meeting.</li> </ul>	DS
3.3	<p><u>New starter training leaflets</u></p> <ul style="list-style-type: none"> <li>➤ LA had received the leaflets from the printers.</li> <li>➤ MJT said it had been arranged that the Fire Officers would hand out leaflets at new starter induction sessions.</li> </ul>	TW
3.4	<p><u>Callsafe presentation/toolbox talks</u></p> <ul style="list-style-type: none"> <li>➤ NR tabled a paper reviewing CallSafe and HEFMA toolbox talks. NR advised that Callsafe was the more viable option.</li> <li>➤ NR had met with Dave Carr from Callsafe and talked through the options available. He mentioned that the talks could be individually designed and specific to HEFT and would include training notes. The cost would be £7,800 (+VAT) for 22 toolbox talks.</li> <li>➤ Train the trainer was discussed with the consensus being that each EM would nominate staff to train as the trainer. The cost would be £1,200 for a 1 day course for up to 8 people. NR said that the lead time would be 3-4 months.</li> <li>➤ DA advised that NR should contact Kevin Hares to discuss and verify that there would be no contradiction to Trust policy.</li> <li>➤ NR would arrange to meet with Dave Carr and get a written proposal.</li> </ul>	NR
3.5	<p><u>Re-visit to Generator Room @ SOL</u></p> <ul style="list-style-type: none"> <li>➤ MK &amp; GG advised that this had now been completed.</li> </ul>	NR
	<p>Action Plan actions from the previous meeting</p> <p><u>Item 1.2 GHH – letter to trade staff</u></p> <ul style="list-style-type: none"> <li>➤ DS confirmed that the draft letter had been ratified by all apart from the legal team. DA advised that she had emailed the response from the NHSLA to DS.</li> <li>➤ DS would send out letter by the end of the week if there were no outstanding issues.</li> <li>➤ DS to let MJT know when it's been completed.</li> </ul> <p><u>Item 3.1 SOL – estates staff asbestos training</u></p> <ul style="list-style-type: none"> <li>➤ MK advised that there was now three members of staff to be trained (2 new starters).</li> <li>➤ TW stated that new starters would be picked up on the annual training plan.</li> </ul> <p><u>Item 5.3 - warning onto works orders (carried forward)</u></p> <ul style="list-style-type: none"> <li>➤ TW advised that he was trialling inputting a warning onto Works Orders, "Warning ACMs detected in this area" without linking it to MICAD. TW confirmed this would be done by the next meeting.</li> </ul> <p><u>Item 7.3 – SOP for invasive work on doors</u></p> <ul style="list-style-type: none"> <li>➤ AG presented a pictorial generic SOP for invasive work on doors which he had previously emailed to all.</li> <li>➤ The SOP was ratified.</li> </ul>	DS
		TW

	<ul style="list-style-type: none"> <li>➤ It was discussed that a shared folder was needed where SOPs can be accessed by all estates staff, NR to arrange.</li> <li>➤ EMs to email NR estates staff user log on details.</li> </ul>	NR EMs
4.	<p><b>OHS Operational Report</b></p> <p>To be read in conjunction with OHS report (attachment 2)</p> <p>GG presented his report with the following points noted:</p> <p><u>Good Hope Hospital</u></p> <ul style="list-style-type: none"> <li>➤ DS mentioned that in some instances OHS reports were taking too long to be completed. GG said that they take about 10 days to complete. He advised that given notice they could be completed quicker but with an increase in cost.</li> </ul> <p><u>Heartlands Hospital</u></p> <ul style="list-style-type: none"> <li>➤ TW to identify which staff will need Face Fit Testing.</li> <li>➤ OHS's survey to Pathology Block had to be aborted due to excessive AIB's. GG &amp; TW to discuss outside of the meeting.</li> <li>➤ GG queried that he was still waiting for the SLA to be signed and returned. TW and MJT to meet and discuss.</li> </ul> <p><u>Solihull Hospital</u></p> <ul style="list-style-type: none"> <li>➤ MK to identify which staff will need Face Fit Testing.</li> </ul>	<p>TW</p> <p>MJT/TW</p> <p>MK</p>
5.	<p><b>Trust Action Plan</b></p> <p>The Action Plan (attachment 3) was discussed and the focus was to get the actions from the original Action Plan closed.</p> <p><u>Action 1.0 – Identify the level of exposure</u></p> <ul style="list-style-type: none"> <li>➤ The 3 original individuals at GHH who had been exposed to asbestos were being managed by OH. Further members of staff had been identified at GHH who could potentially have been exposed; their details were also with OH.</li> <li>➤ MK confirmed that PLANET had been interrogated and no one had been exposed at SOL.</li> <li>➤ TW confirmed that asbestos had been found in fire doors, this was cross referenced on PLANET and no member of staff had been exposed.</li> <li>➤ MJT advised that this action could now be closed.</li> </ul> <p><u>Action 2.0 – Health Surveillance</u></p> <ul style="list-style-type: none"> <li>➤ MJT said that OH had agreed to pick up Health Surveillance at the meeting between Amanda Savage (OH), MJT and DS on 8 November 2012.</li> <li>➤ DS mentioned that he hadn't been given any assurance from OH that surveillance was going ahead.</li> <li>➤ MJT advised that this action could not be closed until he'd received formal confirmation of what surveillance is being carried out.</li> </ul>	

### Action 3.0 – Training/Skills & Knowledge

- 3.1 Estates Personnel - EMs were confident that all estates staff had received sufficient training on asbestos awareness on all sites.
- MJT advised that this action could be closed.
- 3.2 Estates Management – Estates Management had completed CP training on all sites.
- MJT advised that this action could be closed.
- 3.3 Trust Wide – Leaflets are circulated via H&S Groups and Trust Induction via Fire Safety Officers.
- MJT advised that this action could be closed.
- DA said that it may be possible to get something mentioned in the Chief Executive Team Brief.
- 3.4 Contractors – DS said that he wasn't 100% certain that all Contractors received a site induction at GHH. The issue arose when contractors come on site out of hours.  
At present a paper copy is used; an electronic procedure is due to be in place by April.
- MJT advised that this action could be closed as the implementation of this would be monitored by the Group.

### Action 4.0 Detail of information on works orders issued to carry out work

- TW to email the Group as soon as the generic warning on works orders had been implemented.
- MJT advised that this interim action could not be closed until the next meeting.

### Action 5.0 Reviewing our existing procedure

- An escalation plan is now in place and two SOPs had been developed.
- It was discussed that a link to a generic Risk Assessment was needed.
- Toolbox talks had been discussed (see item 3.4). MJT advised that he had put forward a bid for revenue to fund this and that this would be trialled at BHH.
- MJT advised that this action could be closed and would be monitored by the Group.

### Action 6.0 Review of Policies & Procedures

- Awareness of Policies and Procedures had been communicated to all.
- MJT advised that this action could be closed.

### Action 7.0 Incident Reporting

- HSE had enquired about general awareness; personal decontamination; emergency entry and exit procedures.
- GG to send procedure to NR.
- NR to bring SOP to next meeting.
- MJT advised that this needed more work and could not be closed.

### Action 8.0 Asbestos Surveillance

- Compliance was monitored by this Group.
- MJT advised that this action could be closed.

### Action 9.0 Review 2004 & 2011 survey results for fire doors

**TW**

**GG  
NR**

- All relevant doors on all sites had been surveyed.
- MJT advised that this action could be closed.

#### Action 10.0 Labelling

- All doors had been labelled on all sites. Pathology @ BHH had also been completed.
- GG said that condition monitoring was due in April, he suggested having a reel of labels which he could use for labelling when visiting the sites.
- MJT advised that this action could be closed.

#### Action 11.0 Risk Assessment Arrangements

- This would be monitored by the Group.
- MJT advised that this action could be closed.

#### Action 12.0 Review of Equipment used when working in areas of risk

- MJT said that this had been reviewed but wasn't practical.
- MJT advised that this action could be closed.

MJT advised that 9 out of the 12 actions from the original action plan could be closed and the 3 outstanding would be transferred to the Group for monitoring.

### **6. Incidents & Risk Assessments**

Already discussed.

### **7. Any other business**

- GG mentioned that he needed an order number for air monitoring that was carried out in Pathology.
- DS said that the operational issues at Fothergill were creating problems.
- DA said that if DS sent her a brief then if any complaints came to H&S department they could be dealt with before they were escalated. DS to email DA details.
- AG mentioned that OHS were wording Asbestos Removal as Environmental Cleans. For future reference it was to be called Asbestos Abatement works.
- MJT advised that the existing TOR, the membership and the objective of the Group needed to be reviewed. LA to send to all for comments and would be discussed at the next meeting.
- DS said that he would be assessing the online induction on estates staff at the end of February.
- DS to bring Contractors Beta Test Induction demonstration to the next meeting.

**MJT/TW**

**DS**

**GG Note**

**LA**

**DS**

### **8. Date of next meeting**

Thursday 7<sup>th</sup> March 2013 @ 2pm, Planning Room, Bordesley House