

Enquiries to:  
Committee Services

Direct Dial: 024 7637 6204

Direct Email:  
[committee@nuneatonandbedworth.gov.uk](mailto:committee@nuneatonandbedworth.gov.uk)

Date: 23<sup>rd</sup> July 2024

**INDIVIDUAL CABINET  
MEMBER DECISION**

Dear Sir/Madam,

The Cabinet Member for Planning and Enforcement (Councillor R. Roze) is to consider the following reports and make a decision on **Wednesday, 31<sup>st</sup> July 2024 at 11.30pm** in the Committee Room D, Town Hall, Nuneaton.

Yours faithfully,

TOM  
SHARDLOW  
Chief Executive

# A G E N D A

## PART 1

### PUBLIC BUSINESS

#### 1. EVACUATION PROCEDURE

A fire drill is not expected, so if the alarm sounds, please evacuate the building quickly and calmly. Please use the stairs and do not use the lifts. Once out of the building, please gather outside Lloyds Bank on the opposite side of the road.

Exit by the door by which you entered the room or by the fire exits which are clearly indicated by the standard green fire exit signs.

If you need any assistance in evacuating the building, please make yourself known to a member of staff.

Please also make sure all your mobile phones are turned off or set to silent.

#### 2. PUBLIC CONSULTATION - Members of the public will be given the opportunity to speak on specific agenda items if notice has been received.

Members of the public will be given three minutes to speak on a particular item and this is strictly timed. The chair will inform all public speakers that: their comments must be limited to addressing issues raised in the agenda item under consideration: and that any departure from the item will not be tolerated.

The chair may interrupt the speaker if they start discussing other matters which are not related to the item, or the speaker uses threatening or inappropriate language towards Councillors or officers and if after a warning issued by the chair, the speaker persists, they will be asked to stop speaking by the chair.

The chair will advise the speaker that, having ignored the warning, the speaker's opportunity to speak to the current or other items on the agenda may not be allowed. In this eventuality, the chair has discretion to exclude the speaker from speaking further on the item under consideration or other items of the agenda.

#### 3. DECLARATIONS OF INTEREST - To receive declarations of Disclosable Pecuniary and Other Interests, in accordance with the Members' Code of Conduct.

##### **Declaring interests at meetings**

If there is any item of business to be discussed at the meeting in which you have a disclosable pecuniary interest or non-pecuniary interest (Other Interests), you must declare the interest appropriately at the start of the meeting or as soon as you become aware that you have an interest.

Arrangements have been made for interests that are declared regularly by members to be appended to the agenda (**Page 4**). Any interest noted in the Schedule at the back of the agenda papers will be deemed to have been declared and will be minuted as such by the Committee Services Officer. As a general rule, there will, therefore, be no need for those Members to declare those interests as set out in the schedule.

There are, however, TWO EXCEPTIONS to the general rule:

1. When the interest amounts to a Disclosable Pecuniary Interest that is

engaged in connection with any item on the agenda and the member feels that the interest is such that they must leave the room. Prior to leaving the room, the member must inform the meeting that they are doing so, to ensure that it is recorded in the minutes.

2. Where a dispensation has been granted to vote and/or speak on an item where there is a Disclosable Pecuniary Interest, but it is not referred to in the Schedule (where for example, the dispensation was granted by the Monitoring Officer immediately prior to the meeting). The existence and nature of the dispensation needs to be recorded in the minutes and will, therefore, have to be disclosed at an appropriate time to the meeting.

Note: Following the adoption of the new Code of Conduct, Members are reminded that they should declare the existence and nature of their personal interests at the commencement of the relevant item (or as soon as the interest becomes apparent). If that interest is a Disclosable Pecuniary or a Deemed Disclosable Pecuniary Interest, the Member must withdraw from the room. Where a Member has a Disclosable Pecuniary Interest but has received a dispensation from Audit & Standards Committee, that Member may vote and/or speak on the matter (as the case may be) and must disclose the existence of the dispensation and any restrictions placed on it at the time the interest is declared.

Where a Member has a Deemed Disclosable Interest as defined in the Code of Conduct, the Member may address the meeting as a member of the public as set out in the Code.

Note: Council Procedure Rules require Members with Disclosable Pecuniary Interests to withdraw from the meeting unless a dispensation allows them to remain to vote and/or speak on the business giving rise to the interest.

Where a Member has a Deemed Disclosable Interest, the Council's Code of Conduct permits public speaking on the item, after which the Member is required by Council Procedure Rules to withdraw from the meeting.

4. ASBESTOS POLICY, ASBESTOS MANAGEMENT PLAN, AND ASBESTOS PROCEDURES MANUAL a report of the Assistant Director – Environment and Enforcement attached **(Page 5)**
5. CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH) PROCEDURE a report of the Assistant Director – Environment and Enforcement attached **(Page 50)**
6. HEALTH SURVEILLANCE POLICY a report of the Assistant Director – Environment and Enforcement attached **(Page 64)**
7. NOISE MANAGEMENT PROCEDURE a report of the Assistant Director – Environment and Enforcement attached **(Page 77)**
8. PERSONAL PROTECTIVE EQUIPMENT (PPE) POLICY a report of the Assistant Director – Environment and Enforcement attached **(Page 92)**
9. RESPIRATORY PROTECTIVE EQUIPMENT (RPE) POLICY a report of the Assistant Director – Environment and Enforcement attached **(Page 107)**

**Councillor Roze - Schedule of Declarations of Interests – 2024/2025**

	<b>Name of Councillor</b>	<b>Disclosable Pecuniary Interest</b>	<b>Other Personal Interest</b>	<b>Dispensation</b>
	General dispensations granted to all members under s.33 of the Localism Act 2011			Granted to all members of the Council in the areas of: <ul style="list-style-type: none"> <li>- Housing matters</li> <li>- Statutory sick pay under Part XI of the Social Security Contributions and Benefits Act 1992</li> <li>- An allowance, payment given to members</li> <li>- An indemnity given to members</li> <li>- Any ceremonial honour given to members</li> <li>- Setting council tax or a precept under the Local Government Finance Act 1992</li> <li>- Planning and Licensing matters</li> <li>- Allotments</li> <li>- Local Enterprise Partnership</li> </ul>
	R. Roze	Director – InfiniTEN Ltd	Representative on the following Outside Bodies: <ul style="list-style-type: none"> <li>• A5 Member Partnership</li> <li>• Nuneaton and Bedworth Community Enterprises Ltd</li> <li>• PATROL (Parking and Traffic Regulations Outside of London) Joint Committee Services.</li> <li>• Building Control Partnership Steering Group</li> <li>• Bedworth Town Deal Board</li> </ul>	

---

**Cabinet/Individual Cabinet Member Decision**

---

**Report Summary Sheet**

**Date:** 31 July 2024

**Subject:** Asbestos Policy, Asbestos Management Plan, Asbestos Procedures Manual

**Portfolio:** Public Services

**From:** Assistant Director – Environment and Enforcement

**Summary:**

This report is to present the Asbestos Policy, Asbestos Management Plan, Asbestos Procedures Manual for consideration and approval.

**Recommendations:**

That the Asbestos Policy, Asbestos Management Plan, and Asbestos Procedures Manual (Appendix A) are approved.

**Options:**

1. Approve the Asbestos Policy, Asbestos Management Plan, and Asbestos Procedures Manual, which will ensure that the Council meets the regulatory requirements of the Health & Safety at Work Act 1974 and the Control of Asbestos Regulations 2012.
2. Do not approve the documents, which could expose the Council to health and safety risks.

**Reasons:** Nuneaton and Bedworth Borough Council (NBBC) has obligations to ensure the health, safety and well-being of every employee and others that may be affected by the organisations activities so far as is reasonably practicable. The Asbestos Policy, Asbestos Management Plan, and Asbestos Procedures Manual will ensure that the Council has adequate systems for the control of asbestos in it's undertaking.

**Consultation undertaken with Members/Officers/Stakeholders**

Internal Consultation has taken place with relevant employees, management and trade unions.

**Subject to call-in:** Yes

**Ward relevance:** All

**Forward plan:** No

**Building a Better Borough Aim:** 1

**Building a Better Borough Priority:** 1

**Relevant statutes or policy:**

Health and Safety at Work etc. Act 1974 and regulations made under this Act.  
Control of Asbestos Regulations 2012

**Equalities Implications:** None.

**Human resources implications:** None

**Financial implications:** None

**Health Inequalities Implications:** None

**Section 17 Crime & Disorder Implications:** None

**Risk management implications:** None

**Environmental implications:** None

**Legal implications:** The Control of Management of Asbestos at Work Regulations 2012 set out duties that employers have to manage asbestos in the workplace.

**Contact details:** Rachel Fleeson– Head of Safety and Environmental Health

**024 76376402**

[rachel.fleeson@nuneatonandbedworth.gov.uk](mailto:rachel.fleeson@nuneatonandbedworth.gov.uk)

**Alastair Blunkett-Assistant Director – Enforcement and Environment**

**024 76376233**

[alastair.blunkett@nuneatonandbedworth.gov.uk](mailto:alastair.blunkett@nuneatonandbedworth.gov.uk)





need to do to regarding the management of asbestos in NBBC properties. Managers must ensure that any activity involving asbestos containing materials has a risk assessment undertaken prior to use.

3.5 The documents establish what managers and employees need to do to comply with the legislation.

#### 4 Consultation

4.1 Senior managers were consulted. Comments received have been considered and the policy amended where necessary.

4.2 The policy was consulted on with the unions. No comments have been received.

4.3 The documents were put to the Health and Safety Co-Ordinator's Group (HASCOG) on 25 April 2024, it was agreed the consultation period was to be extended until 10th May 2024 due to the local election. HASCOG approved the documents on the understanding they did not fundamentally change after consultation.

4.4 Following this HASCOG meeting on the 25 April 2024, additions sections were added to the Asbestos Procedures Manual for the Corporate Teams. This was then put out to consultation again and taken back to HASCOG and approved on the 18 July 2024.

4.5 The three documents were approved at Management team on the 23 July 2024.

#### 5 Conclusion

5.1 To approve the Asbestos Policy, Asbestos Management Plan, and Asbestos Procedures Manual.

5.2 Once approved the documents will be circulated to all employees and made available on the DASH and Delta systems.

5.3 Corporate Health & Safety will support teams to meet the requirements laid out in this management plan.

#### 6 Appendices

Appendix A – Asbestos Policy, Asbestos Management Plan and Asbestos Procedures Manual

7 Background Papers none

Alastair Blunkett  
Assistant Director – Environment and Enforcement

**Appendix A**

# Nuneaton and Bedworth Borough Council

## ASBESTOS POLICY (001)

Related Documents: -

- 002. Asbestos Management Plan
- 003. Asbestos Procedures Manual

### Quality Record

Issue No.	Date	Stage	Agreed
-----------	------	-------	--------

4	March 2014	HASCOG	13 March 2014
		Management Team (MT)	N/A
		Single Member	15 April 2014
5	June 2015	HASCOG	18 June 2015
		Single Member	16 July 2015
6	November 2016	HASCOG	3 October 2016
		Single Member	
7	December 2018	HASCOG	31 <sup>st</sup> January 2019
7		Single member decision	1 <sup>st</sup> February 2019
7	January 2020	Policy review	Reviewed and no changes to report January 2020 Confirmed at HASCOG 30 <sup>th</sup> January 2020
8	April 2024	HASCOG	
		Management Team	
		Employment Committee	

This policy will be reviewed on an annual basis or whenever there are major changes in responsibilities, asbestos legislation, HSE approved codes of practice or guidance or any incidents involving asbestos and updated as and when appropriate.

## **Contents**

### **1. Introduction**

## **Page**

**4**

<b>2.</b>	<b>Background</b>	<b>4</b>
<b>3.</b>	<b>Statement of Policy</b>	<b>4</b>
<b>4.</b>	<b>Organisational Arrangements &amp; Responsibilities</b>	<b>7</b>
 <b>Appendix A – Duty Holders</b>		 <b>12</b>

**1. Introduction**

- 1.1 This document sets out the approach of Nuneaton and Bedworth Borough Council (NBBC) to ensure safe management of Asbestos present in all the buildings owned, occupied, and used by the Council.
  - 1.2 This document has been produced under the framework of the Council's Health & Safety Policy to:
    - Ensure that NBBC meets the regulatory requirements of the Health & Safety at Work Act 1974 and the Control of Asbestos Regulations 2012.
    - Set out arrangements necessary to achieve safe management of Asbestos.
    - Provide detailed procedures for the conduct of activities that involve contact or work either with or in the vicinity of Asbestos Containing Materials (ACMs).
  - 1.3 This policy will run in conjunction with the Asbestos Management Plan 002 and the Asbestos Procedures Manual 003.
- 2. Background**
- 2.1 Asbestos kills approximately 5000 workers each year, around 20 tradesmen die each week because of past exposure. Asbestos was banned from use in the UK in 1999 but can be present in any building built or refurbished before the year 2000.
  - 2.2 Asbestos products in good condition do not present a hazard and as such are safe to leave in place and be monitored and managed. The Council recognises that the unnecessary removal of asbestos that is in good condition is a misuse of financial resources and could lead to an increased risk of exposure in the short term.
  - 2.3 NBBC operate/own a wide range of properties which include public buildings, industrial premises, shops, leisure & amenity buildings, houses, independent living schemes, homeless hostels, and houses of multiple occupation (HMO's).
  - 2.4 This document replaces all previous Asbestos Policy, Management Plan and Procedure documents adopted by the Council.
- 3. Statement of Policy**
- 3.1 NBBC are committed to abiding by all current Health & Safety Legislation, Approved Codes of Practice and all HSE guidance notes relevant to the safe management of asbestos especially the Control of Asbestos Regulations 2012 (CAR2012). As a result, the Council is committed to take all measures necessary to ensure that exposure to asbestos is prevented or where this is not practicable reduced to the lowest level possible.
  - 3.2 To facilitate a co-ordinated approach to the management of asbestos across all the Council services, the Asbestos Management Group (AMG) has been re-formed with representatives from all relevant Council departments and is chaired by Corporate Health & Safety. This group will meet at least quarterly and will be responsible for ensuring compliance with this policy.
  - 3.3 AMG will provide updates to the Health & Safety Co-ordinators Group (HASCOG) who will monitor the council's performance regarding the asbestos

management. The Health & Safety Teams (Corporate & Housing) will oversee management of the Council's asbestos portfolio.

3.4 The Council will ensure that:

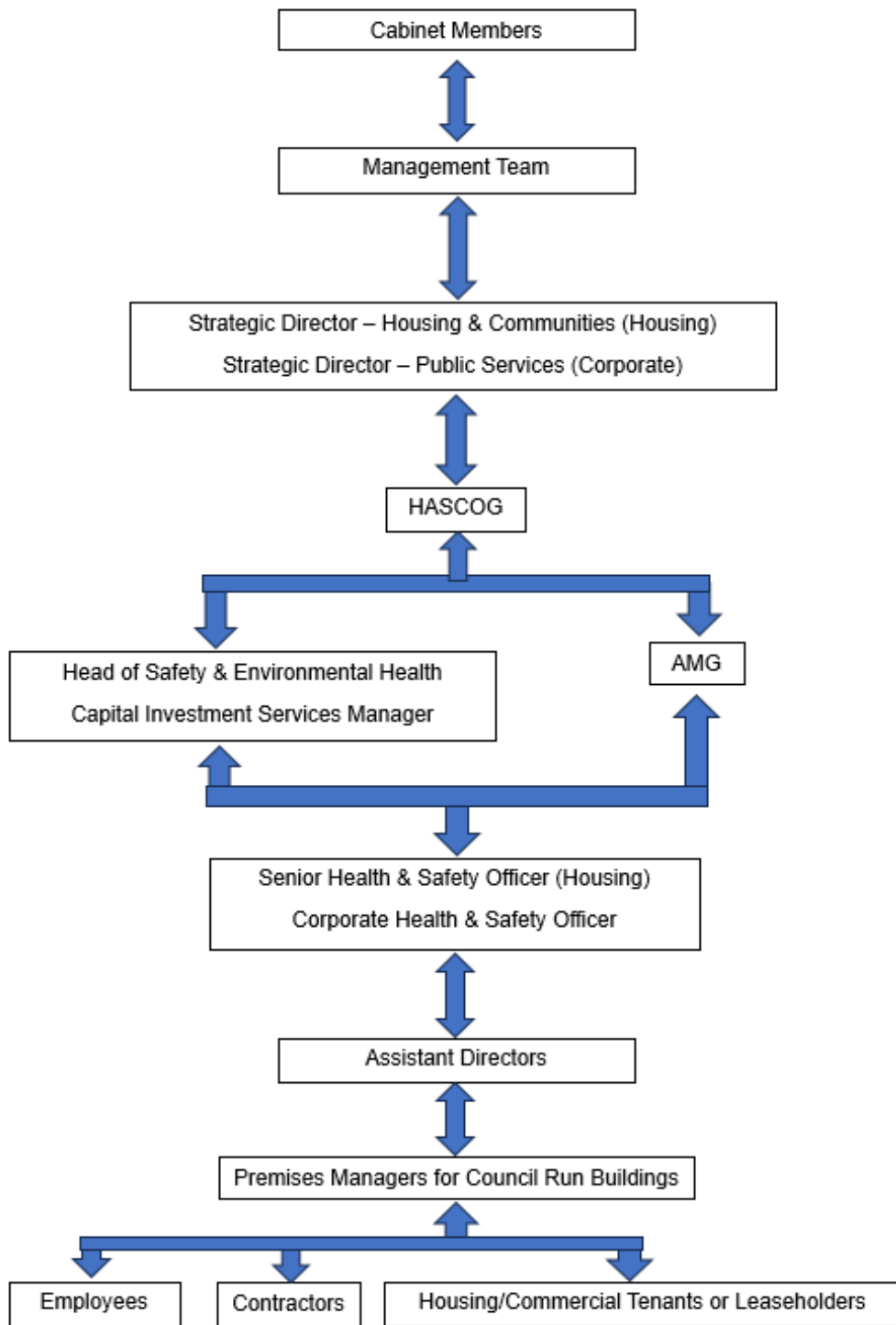
- It will not use any product containing asbestos in future work on properties or in the delivery of services.
- All domestic and non-domestic properties under its ownership are to have a survey identifying the presence and condition of asbestos products. This survey is to be undertaken by a competent accredited (UKAS ISO17020) Surveyor. This information is maintained within the asbestos management database. (Regulation 4 CAR2012)
- Where ACMs are identified in a communal area of a building, priority assessments will be undertaken to define any risks posed by them. Where ACMs are found to be in good condition and unlikely to be disturbed during the day-to-day use of the communal area, it will be left in place and monitored on an annual basis. (Regulation 4 CAR2012).
- Where ACMs are found in a condition which requires removal or any other remedial work to make safe, sufficient budgetary provision will be made to conduct these works.
- Any damaged ACM's that are found to be high risk will be made safe and removed as soon as possible.
- Air tests will be carried out as appropriate.
- Procedures are established to ensure that the relevant information about the presence of asbestos in a building is provided to all appropriate persons who have the possibility of disturbing it during their tasks. (Regulation 11 CAR2012)
- Whenever any building alteration, refurbishment, demolition, or routine maintenance works are to be undertaken, no works will commence until the presence of any ACMs is established, fully understood and all associated costs are included in the project or maintenance costs. (Regulation 4, 7 & 11 CAR2012)
- Whenever any works result in the removal or change of condition of identified ACM, that these changes are reported to the Housing Health & Safety Team to be recorded on the asbestos management database. (Regulation 4 CAR2012)
- No change of use of any communal room or building will be implemented until the full implications of any ACMs are considered and until the priority risk scores have been calculated to consider the changes. (Regulation 4 CAR2012)
- Competent contractors holding an appropriate licence will undertake all removal and encapsulation works with licenced ACM's. (Regulation 8 CAR2012)
- The Council has decided that for work on a very low risk ACM, it will train appropriate operatives to Cat B level. (Regulation 10 CAR2012)
- All PPE or RPE required are provided and maintained free of charge to employees and agency staff and relevant training will be provided by a competent person. (Regulations 11 & 14 CAR2012)

- Where work is to be undertaken in premises, information and guidance will be made available to any person in the vicinity or likely to be affected by the works to ensure they are not exposed to any risk. (Regulation 11 CAR2012)
- Appropriate emergency procedures will be followed in the event of any inadvertent disturbance of ACMs or suspected ACMs or any other emergency incident e.g., fire, health issues or power cut etc. (Refer to Asbestos Procedures manual 003) (Regulation 15 CAR2012)
- Appropriate health surveillance procedures to be put in place in any situation where risk assessments or other exposure evaluations show that employees may have been exposed to asbestos above the control limit of 0.1f/cm<sup>3</sup> as detailed in CAR 2012. (Regulation 22 CAR2012)
- Appropriate procedures are put in place to ensure all asbestos waste is disposed of in accordance with the Hazardous Waste Regulations 2005 and are transported to appropriate licenced waste management sites by registered carriers. (Regulation 24 CAR2012)
- A UKAS ISO17025 accredited environmental analyst (ideally independent and impartial to the removal company) is appointed to supervise all removal and encapsulation works and to undertake the 4-stage clearance test undertaken by licenced contractors. (Regulation 16 Car2012)
- Premises managers or managers in charge of the contract are to forward appropriate documentation to the Housing Health & Safety Team on the completion of any work on ACMs so the asbestos database can be updated. (Regulation 4 CAR2012)
- All employees who are involved with ACM works or any management responsibilities for rooms or buildings containing ACMs will receive training relevant to their level of involvement. (Regulation 10 CAR2012)

#### **4. Organisational Arrangements and Responsibilities**

##### The Asbestos Management Structure of NBBC

4.1 The Asbestos Management Structure for NBBC set out below shows the organisational arrangements and how the Asbestos Management Policy is operated and managed.



Chief Executive



- 4.2. The ultimate responsibility ensuring compliance to the Asbestos Management Policy rests with the Chief Executive. They will ensure that AMG is maintained and adopts a co-ordinated approach to asbestos management.
- 4.2.1 The Chief Executive will ensure that the Strategic Directors are provided with all necessary resources to meet the objectives in the Asbestos Policy and their specific responsibilities within their own portfolio.
- 4.2.3 The Chief Executive will ensure the Strategic Directors comply with their duty towards safe management of asbestos within their portfolios and will hold them accountable to do so.
- 4.4.4 The Chief Executive will communicate to the Elected Members of the Council progress with the management of asbestos and update them on changes in legislation and associated HSE guidance which the Council must comply.

#### Strategic Directors and Assistant Directors

- 4.3 The responsibilities of Strategic and Assistant Directors are to ensure compliance with Health & Safety Legislation and the implementation of safe working practices and procedures within their respective service areas. This document addresses their specific duties in relation to the management of asbestos in full compliance with the statement of policy adopted by the Council.
- 4.3.1 The Strategic & Assistant Directors will be responsible for the safe management of asbestos, in full compliance with all relevant legislation, approved codes of practice, HSE guidance and the NBBC Asbestos Management Policy documents for all buildings and undertakings under their control.
- 4.3.2 Assistant Directors will hold the responsibilities of the “duty holder” for their service area in compliance with Regulation 4 CAR2012.
- 4.3.3 The Assistant Directors can identify appropriate persons within their areas of responsibility who the daily functions of the “duty holder” can be delegated to ensure that the required duties can be complied with on a day-to-day basis.
- 4.3.4 Regarding the Council’s buildings, the person to whom the duty holder functions have been delegated will generally be the person with day-to-day control of the building in question.
- 4.3.5 The Strategic & Assistant Directors will ensure the delegated duty holder is competent for the role and are provided with training to acquire the necessary skills to undertake these duties with the requisite resources and authority so they can effectively discharge them.
- 4.3.6 The Assistant Directors will adopt the procedures set out in the Asbestos Procedures Manual 003 and the Councils Management Plan 002 to ensure compliance with Regulation 4 CAR2012 within all aspects of their respective service areas.

#### Premises Managers

- 4.4. All premises managers across all council services to whom duty holder responsibilities have been delegated will ensure:
- Access to the asbestos database (N-Share) is obtained and can be referred to at any time by any person who may need access to this information or that an up-to-date hard copy is available on site. (N-share passwords can be obtained from the Corporate Health & Safety Team Administrator).
  - The condition of all the identified ACMs is checked regularly as part of the routine management of the premises in addition to the annual inspection organised by the Health & Safety Teams (Corporate & Housing).
  - Information relating to the presence of ACMs in the building are conveyed to all persons who may need to know (porters, cleaning staff, Independent Living Officers etc).
  - Whenever a change in condition of an ACM is identified, the premises manager will ensure that the request for any maintenance work is conveyed to their relevant service area and that the required works are undertaken within a reasonable time frame and that no one is put at risk.
  - Where a premises manager considers an ACM has been damaged to an extent that people in that area may be exposed to airborne fibres then the Emergency Procedure outlined in Asbestos Procedures Manual 003 shall be implemented.
  - Whenever a change of use for a building or part of a building is being proposed the premises manager must ensure the area is reassessed for the risk posed by existing ACMs promptly and the Housing Health & Safety Team are notified.
  - No intrusive work is undertaken where asbestos may be present without reference to the appropriate survey information.
  - Where ACMs have been identified in walls and ceilings that no invasive fixings (drawing pins, nails, screws etc) are used in these areas. Breaches of this should be reported to the Corporate or Housing Health & Safety Team.

Asbestos Management Group (AMG)

- 4.5 This group chaired by Corporate Health & Safety representative will ensure a co-ordinated approach to asbestos management across NBBC. It will be responsible for:

- Conducting a review of the Asbestos Policy, Management Plan and Procedures Manual.
- Ensuring compliance with the Asbestos Policy and any legislative requirements in relation to asbestos management.
- Ensuring appropriate inspections are carried out as required by the Management Plan.
- Reviewing training records for internal operatives and external contractors to ensure all relevant personnel have received up to date training and are competent.

- Ensuring appropriate resources are available to deliver the requirements of the Asbestos Policy, Management Plan and Procedures Manual.
- Review priority survey reports and agree appropriate actions for these.
- Ensuring periodic audits are carried out to ensure compliance with the policy and legislative requirements.
- Receiving and considering compliance monitoring information regarding internal/external contractors to ensure procedural requirements are being adhered to.
- Providing HASCOG with periodic reports.
- Ensuring that Corporate & Housing Health & Safety Teams carried out their asbestos management functions effectively.
- Reviewing reports of incidents or near misses to identify mitigating actions to incorporate into procedures.
- Identifying potential improvements to processes and procedures on an ongoing basis.

Head of Safety & Environmental Health, Capital Projects Investment Manager, Corporate Health & Safety Officer and Senior Health & Safety Officer (Housing)

4.6 The above posts will carry out the following functions:

- Ensuring compliance with the current legislative requirements in relation to the management of asbestos within the Council's portfolio.
- The implementation and management of a prioritised asbestos survey programme within the guidelines set out in the Asbestos Management Plan 002.
- Will be responsible for ensuring that appropriate asbestos training for relevant employees is sourced and undertaken.
- Providing asbestos advice and guidance for NBBC personnel and external contractors.
- Collating and archiving all relevant historical asbestos documentation.
- Managing and updating the N-share asbestos database.
- Providing support for managers dealing with asbestos emergency situations in NBBC properties, in accordance with the Procedure Manual 003.
- Overseeing the procurement and ensuring the competency of specialist asbestos contractors.
- Networking with other authorities to share best practice.

Managers or Supervisors Organising Works

4.7 The above posts will carry out the following functions:

- Ensure no works are undertaken by employees or contractors until ACMs have been identified.
- Ensure all relevant employees and contractors have received the appropriate asbestos training.
- Ensure that the emergency procedures in the Asbestos Procedures Manual are implemented and tested periodically.

- Ensure all contractors are competent and adequately managed so NBBCs Asbestos Policy and Management Plan are not compromised.
- Undertake investigations where there has been a significant breach of NBBCs policies and procedures.
- Contribute to the maintenance and review of the Asbestos Policy and Management Plan.
- Provide support and information to AMG.

#### Health and Safety Co-ordinators Group (HASGOG)

4.8 HASCOG will be responsible for ensuring that:

- The Asbestos Management Group (AMG) carries out its functions effectively.
- Adequate consultation and engagement are undertaken with reference to the Asbestos Policy and Management Plan.
- Overall compliance with the Asbestos Policy and Management Plan is achieved.

#### Employees

4.9 Every employee of the Council is responsible to:

- Take reasonable care for the health, safety and welfare of themselves and others who may be affected by their activities regarding ACMs in buildings.
- Co-operate with the implementation of the Council's Asbestos Policy, Management Plan and Procedures Manual.
- Immediately report to their supervisor any damage or disturbance of ACMs or suspected ACMs they become aware of.
- Comply with any working procedure to ensure that their own exposure to airborne asbestos fibres and that of others who may be affected by the activities is kept to below the control limit of 0.1f/cm<sup>3</sup>.
- Use all appropriate personal protective equipment (PPE) and respiratory protective equipment (RPE) that is provided for the safe conduct of any works. Cat B Officers will be face fit tested to ensure a suitable close-fitting mask is provided. Qualitative face fit testing will be provided by suitably trained in house personnel; quantitative face fit testing will be undertaken by a specialist contractor. Operatives undergoing face fit testing and using close fitting masks will be clean shaven, for operatives who are unable to wear close fitting masks due to facial hair or facial deformity the council will supply power assisted respirators and will keep them maintained.
- Co-operate in any investigations regarding any uncontrolled release of asbestos fibres into the working environment.

4.9.1 Anyone who refuses to accept or follow instruction given by a competent person may be subject to the Council's Dismissal, Disciplinary and Grievance Procedures.

#### Contractors

4.10 All contractors working on behalf of NBBC should:

- Adhere to all current Health & Safety Legislation and Regulations including Control of Asbestos Regulations 2012.
- Take reasonable care for the health, safety and welfare of themselves and others who may be affected by their activities regarding ACMs in buildings.
- Ensure they are fully informed regarding the location of ACMs prior to any work commencing.
- Ensure that operatives have received relevant asbestos training for the work involved and have provided copies of certificates to the supervising officer for the works.
- Ensure that all RPE are in good working condition and have been face fitted if required. Face fit certificates will need to be provided.
- Have an emergency procedure for the accidental disturbance of ACM's.

## Appendix A

### Duty Holders

The following have been designated as Duty Holders under Regulation 4 of CAR 2012 for the buildings in their control.

Duty Holders	Current
Tom Shardlow	Chief Executive
Dawn Dawson	Director- Housing & Community Safety
Kevin Hollis	Director- Public Services
Alastair Blunkett	Assistant Director – Environment & Enforcement
Nicola Botterill	Assistant Director – Social Housing & Community Safety
Jonathan White	Assistant Director – Economy
Jane Grant	Assistant Director – Strategic Housing
Katie Memotovic- Bye	Assistant Director – Recreation & Culture

For tenanted and leased properties there will be a joint duty holder role between the occupier and Nuneaton and Bedworth Borough Council, depending on the repairing obligation included in their agreement.

# Nuneaton and Bedworth Borough Council

## Asbestos Management Plan (002)

**Related Documents: -**  
001: - Asbestos Policy  
003: - Asbestos Procedures Manual

### Quality Record

Issue No.	Date	Stage	Agreed
4	March 2014	HASCOG	13 March 2014
		Management Team (MT)	N/A
		Single Member	15 April 2014

5	June 2015	HASCOG	18 June 2015
		Single Member	16 July 2015
6	November 2016	HASCOG	3 October 2016
		Single Member	
7	December 2018	HASCOG	January 2019
	TBC	Single member decision	
8	April 2024	HASCOG	
		Management Team	
		ICMD	

<b><i>Contents</i></b>	<b><i>Page</i></b>
<b>1. Introduction</b>	<b>4</b>
<b>2. Surveys</b>	<b>4</b>
<b>3. Asbestos Database</b>	<b>5</b>

<b>4.</b>	<b>Managing the Asbestos</b>	<b>5</b>
<b>5.</b>	<b>Frequency of Monitoring</b>	<b>6</b>
<b>6.</b>	<b>Recruitment of Building Operatives</b>	<b>7</b>
<b>7.</b>	<b>Responsibilities regarding Contractors</b>	<b>7</b>
<b>8.</b>	<b>Asbestos Training for NBBC Staff</b>	<b>7</b>

## **1. Introduction**

- 1.1 Nuneaton & Bedworth Borough Council (NBBC) recognises the hazards presented by exposing people to asbestos fibres and has a legal obligation to manage Asbestos Containing Materials (ACMs) within its estate and operations to prevent this. This Asbestos Management Plan outlines how NBBC intends to manage the process.



- 1.2 Since 2003 NBBC has undertaken a programme to obtain Asbestos Surveys of Council properties to establish where asbestos of any kind was present, and the procedures required to manage it. These surveys have been collated on the N-share Health & Safety Database. This management plan details the management procedures required to ensure the Council abides by Health & Safety Legislation to ensure, as far as reasonably practicable, that the ACMs are maintained in a condition that present no risk to health.

## **2. Surveys**

- 2.1 HSE information indicates that asbestos may have been used in buildings up to and including 1999. Since 2003 the Council have carried out refurbishment surveys in the majority of the corporate and civic buildings, independent living schemes, communal areas of general-purpose flat blocks, housing stock and commercial or industrial properties within NBBC's Property Portfolio.
- 2.2 Any outstanding asbestos surveys will be completed when access is available and annual re-inspections will add further detail to existing information.
- 2.3 Some tenants may fail to comply with reasonable requests to allow access to their property. In these cases, after all reasonable attempts have failed then the Council will refer the matter to its legal department and seek access through the courts.

### Management Surveys

- 2.4 These are less intrusive surveys that inform NBBCs asbestos register and management plan. They allow NBBC to monitor and manage ACMs during the normal occupation and use of our premises. These should include inspection of areas that are liable to be disturbed and will be carried out regularly to monitor and record condition of ACMs. These surveys could lead to further sampling or remedial works.

### Refurbishment & Demolition Surveys

- 2.5 Refurbishment and demolition surveys are more intrusive and will be the standard survey requested by NBBC. They will also be required for all work which disturbs the fabric of the building. As stated in HSG264 this type of survey is required for all refurbishment & demolition projects. However, if only a part of the building is being altered only the area where the work is planned needs to be surveyed. These localised refurbishment surveys have the specific purpose of identifying ACMs for removal, control, or avoidance during the planned works.

### Bulk Sampling

- 2.6 Based on the results of surveys and inspections bulk sampling will be carried out as required to identify and confirm if asbestos is present. If the ACMs are present appropriate steps will be taken (encapsulation, removal, etc) to eliminate or reduce the level of risk.

### Survey Results

- 2.7 The survey results are recorded on the NBBC N-share database, which is available to all relevant employees, contractors and partnering organisations where applicable. All asbestos surveys or sampling carried out will be added to the database by the Housing Health & Safety team and all electronic versions of the survey report will be stored in the same location. Tenants will

be informed of the location, type, and condition of any known asbestos in their premises. Domestic tenants will also receive advice regarding asbestos and DIY maintenance in their sign-up pack.

- 2.8 Asbestos in communal areas of premises should be labelled and warning signs may be placed alerting to the presence of asbestos where appropriate. Asbestos in domestic properties will not be labelled but documented and stored in the asbestos database with information provided to tenants.
- 2.9 Before any works are carried out in any property the latest asbestos survey must be reviewed and communicated. Evidence of this should be logged.

### **3. Asbestos Database**

- 3.1 The N-Share database is available to relevant personnel with a password. In some cases, the information will be accessed centrally, and the information conveyed to the relevant personnel either by email or on the job ticket depending on the nature and location of the work. Where appropriate, training in accessing, using, and understanding the database will be provided by the Corporate Health & Safety team.
- 3.2 Any employee has the right to be given on request, information regarding ACMs, air tests etc in properties where they are working or have worked.
- 3.3 The database will be populated with the results of all surveys conducted and will be updated to reflect the results of inspections or asbestos related works.
- 3.4 The database will also form NBBCs asbestos register which will include a record of all ACMs across each property. The asbestos register is a live document and will contain current information on the presence and condition of ACMs. The register will include, as a minimum:
- All known and presumed ACMs in NBBC buildings
  - The type of ACM
  - The amount and condition of ACMs including the original and last date of inspection.
  - A material and priority assessment.
  - Identified if ACMs have been presumed

### **4. Managing the Asbestos**

- 4.1 Having established the location and type of asbestos in properties the information is used to:
- Monitor the condition of the asbestos to ensure that it remains in a safe condition and presents no risks to tenants, employees, contractors, or members of the public.
  - Ensure that employees and contractors undertaking work within Council properties are informed of the presence of asbestos.
  - Plan work, to where possible avoid disturbing ACMs. In the event this is unavoidable works should then be undertaken by appropriately trained personnel in accordance with all Health & Safety legislation and guidance documents.
  - Information in the asbestos register should be made available, where possible, to ensure contractors tendering for work are informed of the presence of any asbestos at the tendering stage.
- 4.2 Where the presence of ACMs has been confirmed by testing/surveying, a recommendation will be made by the surveyor to determine the most

appropriate course of action in each case. Any or all of the following options may be applied to an area within the property and will be applied based on an individual assessment of the risk to health and safety presented by each individual ACM.

- **No Action – Monitor**

Where the asbestos is found to be in a good, undamaged condition and is unlikely to be disturbed by the building's occupants, then the ACM will be clearly marked as asbestos (where appropriate) and its location and condition inspected and recorded.

- **Encapsulation – Monitor**

Where the asbestos is found in a location or situation where it is likely to be disturbed by the buildings occupants but can be readily covered over and protected then this will be done. The ACM will be clearly marked as asbestos (where appropriate) and its location and condition inspected and recorded. Encapsulation of asbestos in areas where there is a risk of either mechanical or environmental damage to the encapsulation material will need careful consideration as to whether removal of the ACM may be a safer option.

- **Removal**

Where there is a high risk to health and safety from the ACM or where the material is in poor condition or is likely to be disturbed by the building occupants or by maintenance work, then it is likely that the ACM will be removed.

Where refurbishment, larger maintenance projects or void work within an area is planned any asbestos present will be considered for removal irrespective of any previous decision that may have been taken to leave the ACM in place. HSG264 expects asbestos located in a refurbishment survey to be removed during the refurbishment works.

## **5. Frequency of Monitoring**

- 5.1 All known ACMs left in situ across all non-domestic Council properties will be monitored by the Health and Safety Teams (Corporate & Housing) under Regulation 4 – duty to manage to determine their on-going condition. The frequency of monitoring depends on the type, location of the asbestos and its vulnerability to damage but to ensure best practice any known ACM's will be inspected annually as a minimum. This information is recorded in the database managed by the Housing Health & Safety team. If the condition of the asbestos has deteriorated and needs remedial work or removal the appropriate person will be notified.
- 5.2 Tenants and employees will be made aware of the presence of asbestos and given advice on what to do if they find any damage.
- 5.3 Any damage identified by any member of staff or cause for concern over the condition of any ACM must be brought to the immediate attention of the Engineering and Surveying Team for Corporate properties or Capital Projects Team for Housing properties so appropriate action can be taken. Any ACM at risk of damage or high risk of deterioration (to the point where it may release fibres) will be removed or encapsulated as soon as reasonably practicable.

## **6. Recruitment of Building Operatives**

- 6.1 When recruiting new tradespeople (including agency workers & sub-contractors) for work within the Responsive Repairs section of the Housing & Communities Directorate, the line manager will ensure that all candidates

attend an in-house Asbestos Awareness Course provided by Corporate Health & Safety within three months of employment.

- 6.2 Candidates who have not completed the in house Asbestos Awareness course may be employed but will NOT be allowed to work unless accompanied by a suitably trained operative, until such time a course can be completed.
- 6.3 It is the responsibility of the officer arranging the recruitment to ensure that training is completed or that the new operative does not work unaccompanied.
- 6.4 Refresher Asbestos Awareness Training should be completed annually.
- 7. Responsibilities regarding Contractors**
- 7.1 External Contractors and Sub-Contractors will have to provide evidence of Asbestos Awareness Training and that the training was completed within the last twelve months.
- 7.2 Evidence of Asbestos Training will need to be included in the procurement process for any new contracts as appropriate for the scope of works.
- 7.3 External Contractors on a rolling contract should also provide evidence to the line manager managing the contract that Asbestos Awareness Training is refreshed annually.

## 8 Asbestos training required for NBBC Staff:

### 8.1

POST	QUALIFICATION
Chief Executive	Duty to Manage
Strategic Directors	Duty to Manage
Assistant Directors	Duty to Manage
Senior Managers of departments who have responsibility for the maintenance of NBBC buildings	Duty to Manage
Corporate Health & Safety Officer with Asbestos responsibilities	P405 Duty to Manage
Corporate Health & Safety Team Admin	Duty to Manage
Housing Health & Safety Officer with Asbestos responsibilities	P405
Other Housing Health & Safety Officers	Duty to Manage
Housing Health & Safety Team Admin	Duty to Manage
Team Leaders/Building Surveyors	Duty to Manage/ Cat B
Premises Managers	Duty to Manage
Employees who work on Asbestos Containing Materials	Cat B
Employees whose roles may bring them into contact with ACM's	Asbestos Awareness

### 8.2 Breakdown of Course Curriculums

#### 8.2.1 P405 BOHS Asbestos management in buildings and removal works (4 days)

- Externally provided recognised qualification
- Asbestos Legislation
- Asbestos in Buildings

- Asbestos Removal
- Role of The Laboratory/Analyst
- Practical Training/Examination
- Risk Assessment

#### 8.2.2 **Duty to Manage Asbestos**

- Provided for all duty holders
- Asbestos health effects
- Asbestos Containing Materials
- Regulation 4 of the Control of Asbestos Regulations 2012
- Emergency procedures

#### 8.2.3 **CAT B Non-Licensable Works with Asbestos**

- Asbestos Awareness
- What work can be undertaken
- What work is Notifiable Non-Licensed Work (NNLW)
- What work cannot be undertaken
- Plan of Work
- Use of Class H Vacuum
- Control measures & removal methods
- Use & selection of the correct PPE & RPE
- Cleaning down the work area
- Decontamination
- Correct waste handling on site
- Carriage & disposal

#### 8.2.4 **Asbestos Awareness**

- Provided for all relevant employees annually
- Properties of asbestos and its effect on health
- Legislative framework (in brief)
- Types of products likely to contain asbestos and likely locations
- Operations which could result in asbestos exposure (relevant to workforce)
- Role of asbestos surveys and how to understand what is in them.
- Emergency Procedures

# Nuneaton and Bedworth Borough Council

## Asbestos Procedures Manual (003)

Related Documents  
001: - Asbestos Policy  
002: - Asbestos Management Plan

### Quality Record

Issue No.	Date	Stage	Agreed
4	March 2014	HASCOG	13 March 2014
		Management Team (MT)	N/A
		Single Member	15 April 2014

5	June 2015	HASCOG	18 June 2015
		Single Member	16 July 2015
6	November 2016	HASCOG	3 October 2016
		Single Member	
7	December 2018	HASCOG	January 2019
		Single Member	TBA
8	July 2024	HASCOG	
		Management Team	
		Single member	

<b><i>Contents</i></b>	<b><i>Page</i></b>
<b>1. Introduction</b>	<b>4</b>
<b>2. Emergency Procedures – Housing</b>	<b>5</b>

<b>3. Emergency Procedures – Corporate Buildings</b>	<b>8</b>
<b>4. Emergency Procedures – Suspected materials found in the community</b>	<b>10</b>
<b>5. Routine Maintenance Works</b>	<b>11</b>
<b>6. Major Refurbishment and Demolition Works</b>	<b>12</b>
<b>7. Specification for Contractors working with ACMs</b>	<b>13</b>
<b>8. Labelling</b>	<b>14</b>
<b>9. List of approved Asbestos Company Contractors</b>	<b>16</b>
Appendix A - Operatives Emergency Procedure Credit Card	17
Appendix B – Corporate Building Emergency Procedure Credit Card	18
Appendix C – Corporate Emergency Procedure Credit Cards	19
Appendix D – Corporate Emergency Procedure Credit Cards	20

## **1. Introduction to Asbestos**

### **1.1 What is Asbestos?**

1.1.1 Asbestos is a silicate mineral existing in six forms. Of these only three are normally found in building materials, Crocidolite, Amosite and Chrysotile.



- 1.1.2 Asbestos possesses a range of properties, which make it useful for a variety of products. It is fireproof, a good insulator against heat, sound, and electricity and because it is fibrous it is extremely strong and durable.
- 1.1.3 All three types of asbestos have thin fibres which when inhaled can cause fatal diseases which take 50 – 60 years to develop including Mesothelioma, Lung Cancer & Asbestosis. Past exposure to asbestos still kills approximately 5000 tradesmen a year.
- 1.1.4 Although the use of asbestos in all its forms was banned in 1999, considerable quantities of Asbestos Containing Materials (ACMs) remain within existing buildings, which can be disturbed during routine maintenance, refurbishment and demolition works.

## 1.2 Exposure and Control Limits.

- 1.2.1 The Control of Asbestos Regulations 2012 (CAR2012) require that employers must prevent the exposure to airborne asbestos fibre or where this is not reasonably practicable ensure the exposure level is as low as possible.
- 1.2.2 CAR2012 have a single control limit for all types of Asbestos of **0.1 fibres/cm<sup>3</sup>** of air measured over a 4-hour period, this is the maximum concentration of asbestos fibres in the air. Personnel must not be exposed above this level and exposure should be reduced to as low as possible by other control measures as well as Respiratory Protective Equipment (RPE).
- 1.2.3 Exceeding the control limit will trigger the following requirements:
- Prevention of the spread of asbestos fibres from the work area
  - The area will be designated as a respiratory zone, meaning suitable respirators must be worn by all persons entering the area
  - Control measures must be introduced to reduce the asbestos fibre levels

## 1.3 Incident or Near Miss

- 1.3.1 The Councils Asbestos Management group (AMG) have approved the following definitions:
- An asbestos **incident** is when a known ACM or an unknown material is disturbed, moved, or damaged which releases fibres or debris in the work area.
  - An asbestos **near miss** occurs when unknown material is exposed but not damaged (for instance if boxing around a pipe is removed revealing an unknown material not attached to the removed boxing).
- 1.3.2 All incidents and near misses will be recorded on the Asbestos Incident Form found under Reporting an Accident or Incident in DASH, this should be completed by the supervisor/Cat B officer called to attend the incident.

- 1.3.3 The form will be automatically submitted to the Health & Safety Teams (Corporate & Housing) when the Line Manager will be instructed by Corporate Health & Safety to begin an investigation in liaison with Housing – Health and Safety to establish that procedure was followed if anything can be learned and what improvements can be made to prevent a reoccurrence. The line manager may need to involve HR at this point.
- 1.3.4 All incidents are reported to AMG for discussion of actions required and timetables set for implementation, only after this has happened will the Incident form be formally signed off.

## 2. Emergency Procedures - Housing

### 2.1 Reporting of Suspected Asbestos Containing Materials (ACM)

2.1.1 The following procedure should be followed by all Housing NBBC employees or contractors whenever suspected ACMs are discovered during work.

2.1.2 Housing Operatives will be issued with a card by the Team Leaders outlining this procedure (**Appendix A**) and the following posts will act as Supervisors:

- Repairs Team Leaders
- Void & Planned Team Leader
- Void & Planned Inspectors
- Inspection Team Leader
- Repairs Inspectors (2 team members)
- Building Surveyors
- Clerk of Works

Supervisors will be provided with relevant CAT B training to fulfil this role.

2.1.3 The following posts will act as technical support for the supervisors should they require additional guidance or advice:

- Health & Safety Teams (Corporate & Housing)
- All holders of BOHS P405 qualification
- Out of Hours Surveyors (outside normal business hours)
- Asbestos Surveying Company

2.1.4 The procedure for suspected undamaged ACMs is:

- If a suspect material is discovered **STOP WORK.**
- **Immediately** contact the number on the card and your supervisor to report the issue.
- **Post warning notices** and inform people in the immediate area and request that everyone keep away.
- The supervisor on the card will arrange for sampling and testing to be undertaken.
- If the analysis proves that the material does not contain asbestos, then work may continue.

- If the analysis proves the materials contain asbestos, then removal will be arranged with the licenced asbestos removal company before work can recommence.

The following must be complied with:

- **DO NOT** continue to work in any area where suspected ACMs have been found.
- **DO NOT** attempt to take a sample.

## 2.2 Procedure if Suspected Asbestos Containing Materials (ACMs) are Disturbed or Damaged

2.2.1 The following procedure should be followed by all Housing NBBC employees or contractors whenever suspected ACMs are disturbed or damaged during work.

### 2.2.2 Stop work Immediately and put on Respiratory Protective Equipment (RPE).

- **Isolate** the area leaving all tools and equipment. Shut doors and windows, turn off ventilation systems and fans etc to prevent fibres escaping. If there is a clear route outside (without passing through other rooms) head outdoors otherwise stay in an adjoining vacant room until assistance arrives.
- **Wipe down** any clothing with a damp cloth to limit potential contamination.
- **Immediately** contact the HUB on the number on the card and your supervisor to report the issue.
- **Post warning notices** and inform people in the immediate area and request that everyone keep away.
- **Check again** the asbestos register (N-Share) online (or site copy if available) to establish whether ACMs are present in the work area. Should there be no information for that area then sampling and testing will be arranged.
- If the analysis proves that the material does not contain asbestos, then work can continue, and normal repairs can be carried out.
- If the analysis proves the material to be an ACM, then either remedial works or removal must be arranged.

The following must be complied with:

- **DO NOT** continue to work in any area where suspected ACMs have been found.
- **DO NOT** attempt to take a sample.

2.2.2 Should the material be found to contain asbestos, and the work required means a licenced contractor is necessary then:

- An asbestos removal contractor and environmental analyst will be appointed.
- A scope of work must be prepared and agreed with the analyst, removal contractor and NBBC to repair or remove the ACM as soon as possible.

- The removal contractor will submit notification to the HSE where appropriate.
- The area will remain sealed off until the asbestos works have been completed and the environmental analyst has issued the relevant certificate of reoccupation.
- If the property is tenanted arrangements may need to be made to relocate the tenants during this period.
- It may be necessary to organise further asbestos removal works.

## 2.3 Procedure for Persons Becoming Contaminated with Asbestos Fibres.

2.3.1 If a person(s) believes they may have been exposed to (and their clothing contaminated by) asbestos fibres they must undertake the following:

- **Stop work immediately and put on RPE if not already wearing any.**
- **Isolate** the area leaving all tools and equipment. Shut doors and windows, turn off ventilation systems and fans etc to prevent fibres escaping.
- The person that is contaminated should if there is direct access available go to the outside of the building and find an isolated area. Do not go outside if large numbers are congregating or you must pass through the building.
- If access to outside is not available use an adjoining **vacant** room or **STAY PUT.**
- **Immediately** contact the HUB on the number on the card and your supervisor to report the issue.
- If you do not have suitable overalls and disposal bags, they will be brought to you.
- Once supplied the contaminated person should change into the overalls and place all clothing worn at the time of the exposure into the disposal bag. This bag should be double bagged and conspicuously marked Asbestos.
- Operative(s) must shower at the earliest opportunity paying particular attention to hair.
- If it is found the contamination was asbestos, the clothes will be disposed of as Asbestos waste.
- **ALL** rooms that the contaminated person passed through will need to be closed and sealed until the analysis laboratory confirms there are no asbestos fibres.
- Where exposure concentrations exceeded the control limit the person will be brought under medical supervision by referral to the Councils Occupational Health provider.

2.3.2 In cases of confirmed asbestos exposure all contaminated items including tools/equipment will be removed by the Asbestos removal contractor and either professionally cleaned or disposed of, the Directorate will reimburse the cost of replacements if the correct procedures have been followed.

## 2.4 Out of Hours Emergencies

- 2.4.1 The following procedure should be followed whenever suspected ACMs are discovered out of normal working hours.
- Upon finding the suspected ACM **immediately** call the Councils out of hours emergency number giving details of the location and the cause of the emergency.
  - Do **NOT** attempt to take a sample or interfere with the material in any way.
  - The duty officer will contact an out of hours surveyor or the Councils nominated Asbestos Consultancy for advice and arrange for the location to be sealed or cordoned off with warning notices to be displayed. All persons need to be prohibited from entering the area.
  - A sample of the material will be tested at the earliest opportunity by a UKAS accredited asbestos laboratory.
  - If it is confirmed to be an ACM, then it will be removed by a licenced removal contractor.

## 3. Emergency Procedures – Corporate Buildings

### 3.1 Reporting of Suspected Asbestos Containing Materials (ACM)

- 3.1.1 The following procedure should be followed by all Corporate NBBC employees or contractors whenever suspected ACMs are discovered during work.
- 3.1.2 Corporate Employees will be issued with a card by the Team Leaders outlining the relevant procedure for your department (**Appendix B**) and the following posts will act as Supervisors:
- Principal Building Surveyor Engineering & Surveying
  - Building Surveyor Engineering & Surveying
- Supervisors will be provided with relevant CAT B training to fulfil this role.
- 3.1.3 The following posts will act as technical support for the supervisors should they require additional guidance or advice:
- Health & Safety Teams (Corporate & Housing)
  - All holders of BOHS P405 qualification
  - Out of Hours Surveyors (outside normal business hours)
  - Asbestos Surveying Company
- 3.1.4 The procedure for suspected ACMs is:
- If a suspect material is discovered **STOP WORK.**
  - **Immediately** contact the number on the card and your supervisor to report the issue.
  - **Post warning notices** and inform people in the immediate area and request that everyone keep away.
  - The supervisor on the card will arrange for sampling and testing to be undertaken.

- If the analysis proves that the material does not contain asbestos, then work may continue.
- If the analysis proves the materials contain asbestos, then either remedial works or removal must be arranged.

The following must be complied with:

- **DO NOT** continue to work in any area where suspected ACMs have been found.
- **DO NOT** attempt to take a sample.

### 3.2 Procedure if Suspected Asbestos Containing Materials (ACMs) are Disturbed or Damaged

3.2.1 The following procedure should be followed by all Corporate NBBC employees or contractors whenever suspected ACMs are disturbed or damaged during work.

#### 3.2.2 Stop work Immediately and put on RPE.

- **Isolate** the area leaving all tools and equipment. Shut doors and windows, turn off ventilation systems and fans etc to prevent fibres escaping. If there is a clear route outside (without passing through other rooms) head outdoors otherwise stay in an adjoining vacant room until assistance arrives.
- **Wipe down** any clothing with a damp cloth to limit potential contamination.
- **Immediately** contact the number on the card and your supervisor to report the issue.
- **Post warning notices** and inform people in the immediate area and request that everyone keep away.
- **Check again** the asbestos register (N-Share) online (or site copy if available) to establish whether ACMS are present in the work area. Should there be no information for that area then sampling and testing will be arranged.
- If the analysis proves that the material does not contain asbestos, then work can continue.
- If the analysis proves the material to be an ACM, then either remedial works or removal must be arranged.

The following must be complied with:

- **DO NOT** continue to work in any area where suspected ACMs have been found.
- **DO NOT** attempt to take a sample.

3.2.2 Should the material be found to contain asbestos, and the work required means a licenced contractor is necessary then:

- An asbestos removal contractor and environmental analyst will be appointed.

- A scope of work must be prepared and agreed with the analyst, removal contractor and NBBC to repair or remove the ACM as soon as possible.
- The removal contractor will submit notification to the HSE where appropriate.
- The area will remain sealed off until the asbestos works have been completed and the environmental analyst has issued the relevant certificate of reoccupation.
- It may be necessary to organise further asbestos removal works.

### 3.3 Procedure for Persons Becoming Contaminated with Asbestos Fibres.

3.3.1 If person(s) believe they may have been exposed to and their clothing contaminated by asbestos fibres must undertake the following:

- **Stop work Immediately and put on RPE.**
- **Isolate** the area leaving all tools and equipment. Shut doors and windows, turn off ventilation systems and fans etc to prevent fibres escaping.
- The person that is contaminated should if there is direct access available go to the outside of the building and find an isolated area. Do not go outside if large numbers are congregating or you must pass through the building.
- If access to outside is not available use an adjoining **vacant** room or **STAY PUT.**
- **Immediately** contact the number on the card and your supervisor to report the issue.
- If you do not have suitable overalls and disposal bags, they will be brought to you.
- Once supplied the contaminated person should change into the overalls and place all external clothing worn at the time of the exposure into the disposal bag. This bag should be double bagged and conspicuously marked Asbestos.
- Operative(s) must shower at the earliest opportunity paying particular attention to hair.
- If it is found the contamination was asbestos, the clothes will be disposed of as Asbestos waste.
- **ALL** rooms that the contaminated person passed through will need to be closed and sealed until the analysis laboratory confirms there are no asbestos fibres.
- Where exposure concentrations exceeded the control limit the person will be brought under medical supervision by referral to the Councils Occupational Health provider.

### 3.4 Out of Hours Emergencies

3.4.1 Follow procedure outlined in section 2.4

#### 4. Emergency Procedures – Suspected ACMs Found in the Community (Fly tipping).

##### 4.1 Reporting of Suspected Asbestos Containing Materials (ACMs)

4.1.1 The following procedure should be followed by all NBBC employees or contractors whenever suspected ACMs are discovered in fly tipped waste or in the community.

4.1.2 Waste Management & Greenspace Operatives will be issued with a card by the Team Leaders outlining this procedure (**Appendix C & D**) and the following posts will act as Supervisors:

- Waste Management Supervisors
- Assistant Waste Management Supervisors
- Assistant Waste & Transport Administrator
- Green Spaces Infrastructure Officer
- Open Spaces Technician & Business Support
- Open Spaces Officers (North & South)

4.1.3 The following posts will act as technical support for the supervisors should they require additional guidance or advice:

- Health & Safety Teams (Corporate & Housing)
- All holders of BOHS P405 qualification
- Asbestos Surveying Company

##### 4.2 Procedure for Fly Tipped Waste or Products Found in the Community Contaminated with or Suspected of being Contaminated with Asbestos Containing Materials (ACMs).

###### 4.2.1 Stop work Immediately.

- **Immediately** contact the number on the card and your supervisor to report the issue.
- Contain the material with hazard tape and appropriate signage instructing the public to keep away.
- The supervisor on the card will arrange for sampling and testing to be undertaken.
- If the analysis proves that the material does not contain asbestos, then contact waste management or contracted agent to have the material removed.
- If the analysis proves the materials to be ACMs, then removal of all the fly tipped waste or products must be arranged.
- The area must remain cordoned off from the public until all material has been collected.

The following must be complied with:

- **DO NOT** continue to work in any area where suspected ACMs have been found.



- **DO NOT** attempt to take a sample.

## **5. Routine Maintenance Works**

### **5.1 General Guidance (Non-licenced works & Notifiable Non-Licenced Work)**

5.1.1 The Council and its employees will not **NORMALLY** undertake any non-licenced work.

5.1.2 However, Council Operatives who have received CAT B training (Regulation 10 CAR2012), may carry out small minor works on low-risk ACMs as identified below.

5.1.3 This procedure is intended for use where routine maintenance work is undertaken either in the vicinity of or on ACMs where a licence for the work under the Control of Asbestos Regulations 2012 (CAR2012) is not required. This includes:

- Any work with asbestos cement (AC) including, cleaning, painting, repair, removal, demolition, or dismantling structures containing AC.
- Any work with materials of bitumen, plastic, resins, or rubber which contain asbestos.
- Minor work with asbestos insulation, asbestos coating, and asbestos insulating board (AIB) which because of its limited extent and duration does not require a licence e.g., drilling holes, repairing minor damage, painting, or removal of a single panel of AIB.
- Minor work with asbestos insulation, asbestos coating and AIB where one person spends less than a total of 1 hour in any 7-day period on the task or the total time spent on the work by all the people working on it does not exceed 2 hours.

5.1.4 To ensure compliance with Regulation 4 of the CAR 2012, NBBC will provide all asbestos information about the property to contractors carrying out any work on behalf of NBBC, either by giving access to the Asbestos register on N-share or by hard copy with the job order or a survey in the premises.

#### **5.1.5 Procedure:**

1. When a request for normal maintenance or minor repair work is received the surveyor/repairs advisor will either issue the works order to the contractor or arrange for an inspection, to establish the full extent of work to be carried out.
2. When an inspection is needed the asbestos register and previous survey for the property must be consulted and compared to the onsite register held at the property.
3. The contractor will ensure by consulting the asbestos survey on N-share or paper version (included in the work order) the location of ACMs in relation to the work is understood and the precautions are recorded in the risk assessment and method statement.

4. If any building or part of a building has not been checked for asbestos, the contractor will instruct his staff to proceed with extreme caution and be vigilant for suspect materials as per asbestos awareness training.
5. If any suspect materials are located the contractor's staff should stop work and follow the emergency procedure for damaged, disturbed, or suspected asbestos materials listed earlier in this document.
6. Contractors must be especially careful when working near to:
  - All AIB used for fire protection on steel work, wall partitions, ducts and backing panels in heater units etc.
  - AIB ceiling tiles and wall panels.
  - Asbestos cement roofing products, rainwater goods, drainage pipes, shuttering materials, and water storage tanks.
  - Asbestos textured coating including Artex and similar products.
  - Asbestos ropes and other textile products used as flash guards in electrical equipment and gaskets on oven doors.
  - Asbestos containing plastic products, vinyl floor tiles, toilet cisterns.
  - Asbestos millboard or paper products used in electrical equipment.
7. Contractors should note that whenever asbestos has been used for a specific use in a building there may be debris in the area or unauthorised uses e.g., AIB packing in doorframes & joists, overspray from sprayed coatings or spread of ACMs by cable pulling operations.
8. HSE guidance notes HSG210 – Asbestos Essentials must be followed for all minor maintenance works involving any contact with ACMs.
9. Generally, contractors should always use appropriate control measures and endeavour to keep asbestos materials wet when working on them unless there is risk of electric shock.

## **6. Major Refurbishment and Demolition Works.**

- 6.1 Prior to any major refurbishment, building alterations or proposed demolition building surveyors from either corporate assets or property services must be consulted.
- 6.2 The following procedure will be put in place:
  - An intrusive refurbishment and demolition survey will be commissioned of the areas of the building to be refurbished or altered or of the whole premises to be demolished.
  - A suitable contractor will then be appointed to remove all the asbestos identified in the survey so far as reasonably practicable.
  - On the completion of the asbestos removal and receipt of a certificate of re-occupation the refurbishment or demolition can take place.

## **7. Specification for Contractors working with ACMs.**

### **7.1 Asbestos Surveyors and Sampling Contractors**

7.1.1 Asbestos Surveyors must operate and adhere to all relevant asbestos legislation (CAR 2012) and carry out surveys in line with processes in the HSE document Asbestos: The Survey Guide (HSG264).

7.1.2 They should also:

- Have survey knowledge, and know the risks involved in surveying.
- Have training and experience, and recognise their limitations
- Use an effective quality management system.
- Should be able to demonstrate independence, impartiality and integrity.
- They should also hold appropriate UKAS accreditation.

## **7.2 Removal Contractor (Including encapsulation works)**

7.2.1 The removal contractor must:

- Be licenced by HSE under CAR2012 to undertake removal and encapsulation works.
- Hold Public Liability Insurance as detailed in the Councils Financial Regulations and Standing Orders.
- Demonstrate adequate training of their workforce.
- Have an adopted Health & Safety Policy.
- Adopt safe methods and plans of works.
- Membership of the Asbestos Removal Contractors Association (ARCA) or Asbestos Control Abatement division (ACAD) must also be held.

7.2.2 The following documentation will be required before a contractor is commissioned:

- HSE Licence
- Health & Safety Policy
- Insurance documentation
- Personnel training records
- Equipment maintenance records
- RPE face fit test records
- Plans of work
- Risk assessments
- Details of last 5 removal jobs.

## **7.3 Supervising Analyst**

7.3.1 The Supervising Analyst must have:

- UKAS 17025 accreditation for sampling/fibre counting asbestos fibres in the air and sampling asbestos in bulk materials.
- Participation in Regular Laboratory Counting Exchanges (RICE) and AIMS quality check schemes.
- BOHS S301 module and be BOHS Certified Competent Persons in Asbestos.
- HSE licence for asbestos project management and supervision.

7.3.2 The following documentation will be required:

- HSE Licence
- Health & Safety Policy
- Procedure's manual
- Equipment calibration details
- Insurance documentation
- Personnel training records
- UKAS documentation
- RPE face fit test records
- Plans of work
- Risk assessments
- Details of last 5 supervision or project management works.

#### **7.4 Contractors carrying out works on ACMs not requiring a licence.**

7.4.1 All contractors carrying out routine maintenance works in any Council owned building must:

- Hold Public Liability Insurance as detailed in the Councils Financial Regulations and Standing Orders.
- Demonstrate adequate training of their workforce.
- Have an adopted Health & safety Policy.
- Adopt safe methods and plans of works.

7.4.2 The following documentation will be required:

- Health & Safety Policy.
- Insurance documentation.
- Personnel training records including Asbestos Awareness training for each operative either by approved construction industry passport schemes or certified attendance at a council or UKATA/IATP training session.
- RPE face fit test records.
- Plans of work.
- Risk assessments.

### **8. Labelling**

8.1 *Varying types of Asbestos products have been identified during the surveys conducted in NBBC buildings. Whilst there is no statutory requirement to label these products the Approved Code of Practice (ACOP) "Managing and working with asbestos" (L143) states that:*

**138** "ACMs can be labelled clearly with the asbestos warning sign or some other warning system (e.g. colour coding) can be used. If labelling is not used, the duty holder must make sure that those who might work on the material know that it contains or may contain asbestos before they start work."

The purpose of labelling is to try and prevent potential accidental exposures during maintenance or other activities which may disturb the ACM.

8.2 Labelling and colour coding alone should not be relied upon as a control measure as they may become dirty, obscured, or fall off and therefore should be used as a back-up.

8.3 Common types of ACMs identified during the surveys:

- Loose debris
- Insulating board products
- Gaskets (between pipe & plant sections)
- Rope products (lining to porcelain fuses, gaskets to duct work)
- Cloth products (expansion seal to duct sections, fire blankets)
- Paper products (beneath non-asbestos pipe insulation)
- Textured coatings (ceiling Artex)
- Cement products (corrugated sheets, rainwater pipes, firebreaks)
- Bakelite products (toilet cisterns)
- Bitumen products (adhesive beneath floor tiles)
- Vinyl products (floor tiles, lino)

A full description of the product types can be found within the Asbestos database.

8.4 NBBC will endeavour to label all high-risk ACMs. Labelling may be carried out in all internal communal areas, corporate buildings, and external areas. Labelling will not be carried out in any private dwellings.

### 8.5 Label Types and Areas.

Labels must conform to the Health & Safety (Safety Signs & Signals) Regulations 1996. Please see examples of labels used below:



or



used in public areas



Used in staff areas



Used in plant rooms

## 9. List of Approved Asbestos Company Contacts

### 9.1 Asbestos Removal Contractors.

Including incident assessments, removal of fly tipping, environmental clean etc

**Contractor name:** IES

**Contact:** Ian Whitaker

**Address:** North Street, Wigston, Leicestershire, LE18 1PS

**Tel N°:** 0116 2880000

**Email:** [ian@iesgroup.co.uk](mailto:ian@iesgroup.co.uk)

**Emergency contacts:** Ian Whitaker – 07813 000908 or  
Paul Whitaker – 07779 990612

### 9.2 Asbestos Surveyors and Supervising Analyst.

Including air monitoring, sampling etc

**Contractor name:** SGS United Kingdom Ltd

**Contact:** Aimee Jones

**Address:** First Floor Office Suite, 2 Venture Court, Broadlands,  
Wolverhampton Business Park, Wolverhampton, WV10 6TB.

**Tel N°:** 01902 791565 Ext 2216

**Email:** [aimee.jones@sgs.com](mailto:aimee.jones@sgs.com)

## Housing Operatives Emergency Procedure Card

**ASBESTOS EMERGENCY PROCEDURE**

- If a suspect material is discovered / disturbed **STOP** work immediately.
- If dust / debris have been released - **STAY PUT** unless immediate access is available to outside, close door, and wait until assistance arrives.

**DO NOT WALK THROUGH ANY OTHER PART OF THE PROPERTY**

- Where possible request tenant to stay away from affected area until assistance arrives.
- Contact the HUB on **024 7637 6767**  
Out of Hours call **024 7638 2153**

Aug. 2018

**ASBESTOS EMERGENCY PROCEDURE**

- Give a brief description of what has happened. i.e. where, what, how, amount of debris if any.
- Give your name and contact number, state what department you work for, i.e. voids, planned maintenance etc, give the property address where you are working and number of occupants in property including tenants, i.e. two operatives and two tenants.
- You will receive a telephone call from a designated person who will explain what will happen and what to do.

Appendix B, C & D - Cards in the same format as appendix A will be issued once this procedure has been approved. The following is what will be on the cards:

**Asbestos Emergency Procedure: Corporate Buildings (Appendix B)**

First side to read:

- If a suspect material is discovered/disturbed STOP WORK immediately.
- STAY PUT unless immediate access is available to outside, close door and wait for assistance.
- DO NOT WALK THROUGH ANY OTHER PART OF THE BUILDING.
- Where possible please keep people away from the affected area.
- Contact Glenn Hooper on 07818 454699 or Adam White on 07776 273368
- Out of Hours call 024 76 382153

Other side to read:

- Give your name and contact number, state what department you work for and give the address of where the incident has occurred and the exact location within that building.
- Give a brief description of what has happened detailing the amount of materials/damage.
- Give details of other people with you.
- You will receive a phone call from a designated person who will explain what will happen and what to do.

**Asbestos Emergency Procedure: Waste Management (Appendix C)**

First side to read:

- If a suspect material is discovered/disturbed STOP WORK immediately.
- Contain the material with hazard tape and appropriate signage instructing the public to keep out.
- Ring Waste Management on 07966 928219
- Out of Hours call 024 76 382153

Other side to read:

- Give your name and contact number.
- Give the address and exact location of where the material has been found.
- Give a brief description of what has happened detailing the amount of materials/damage.
- Give details of other people with you.
- You will receive a phone call from a designated person who will explain what will happen and what to do.

**Asbestos Emergency Procedure – Parks and Open Spaces (Appendix D)**

First side to read:

- If a suspect material is discovered/disturbed STOP WORK immediately.
- Contain the material with Hazard tape and appropriate signage instructing the public to keep out.
- Contact Corrine O'Hare on 07741 831878 or Hayley O'Brien on 07966 928179
- Out of Hours call 024 76 382153

Other side to read:



- Give your name and contact number.
- Give the address and exact location of where the material has been found.
- Give a brief description of what has happened detailing the amount of materials/damage.
- Give details of other people with you.
- You will receive a phone call from a designated person who will explain what will happen and what to do.

**Cabinet/Individual Cabinet Member Decision**

**Report Summary Sheet**

<b>Date:</b> 31 <sup>st</sup> July 2024
<b>Subject:</b> Control of Substances Hazardous to Health (COSHH) Procedure
<b>Portfolio:</b> Public Services
<b>From:</b> Assistant Director – Environment and Enforcement

<b>Summary:</b>  This report is to present the revised COSHH Procedure for consideration and approval.
<b>Recommendations:</b>  That the revised COSHH Procedure (Appendix A) is approved.
<b>Options:</b>  1. Approve the procedure, which will ensure that the Council has adequate systems for the control of substances hazardous to health. 2. Do not approve the procedure, which could expose the Council to health and safety risks.
<b>Reasons:</b> Nuneaton and Bedworth Borough Council (NBBC) has obligations to ensure the health, safety and well-being of every employee and others that may be affected by the organisations activities so far as is reasonably practicable. The COSHH Procedure will ensure that the Council has adequate systems for control of substances hazardous to health.

**Consultation undertaken with Members/Officers/Stakeholders**

Internal Consultation has taken place with relevant employees, management and trade unions.

**Subject to call-in:** Yes

**Ward relevance:** All

**Forward plan:** No

**Building a Better Borough Aim:** 1

**Building a Better Borough Priority:** 1

**Relevant statutes or policy:**

Health and Safety at Work etc. Act 1974.

Control of Substances Hazardous to Health Regulations 2002.

**Equalities Implications:** None.

**Human resources implications:** None

**Financial implications:** None

**Health Inequalities Implications:** None

**Section 17 Crime & Disorder Implications:** None

**Risk management implications:** None

**Environmental implications:** None

**Legal implications:**

The Control of Substances Hazardous to Health Regulations 2002 set out duties that employers have towards their employees and others to identify and manage hazardous substances in the workplace.

**Contact details: Rachel Fleeson– Head of Safety and Environmental Health**

**024 76376402**

[rachel.fleeson@nuneatonandbedworth.gov.uk](mailto:rachel.fleeson@nuneatonandbedworth.gov.uk)

**Alastair Blunkett-Assistant Director – Enforcement and Environment**

**024 76376233**

[alastair.blunkett@nuneatonandbedworth.gov.uk](mailto:alastair.blunkett@nuneatonandbedworth.gov.uk)

**AGENDA ITEM NO. 5**

**NUNEATON AND BEDWORTH BOROUGH COUNCIL**

**Report to: Councillor R Roze - 31<sup>st</sup> July 2024**

**From: Assistant Director – Environment and Enforcement**

**Subject: Control of Substances Hazardous to Health (COSHH) Procedure**

**Portfolio: Public Services (Councillor Robert Roze)**

**Building a Better Borough Aim: 1**

**Building a Better Borough Priority: 1**

---

**1 Purpose of Report**

1.1 The purpose of this report is to present the Council's Control of Substances Hazardous to Health (COSHH) Procedure for consideration and approval.

**2 Recommendations**

2.1 That the COSHH Procedure at Appendix A to this report is approved.

**3 Background**

3.1 The COSHH Procedure was last reviewed in 2010. It was felt necessary to review the procedure to ensure that the Council has adequate systems for the control of hazardous substances and to comply with legal obligations.

3.2 The principal aim of the COSHH Procedure is the prevention of ill health in the workplace through:

- Assisting with the identification and management of hazardous substances.
- Supporting employees who regularly use substances identified as a hazardous.

3.3 The procedure was revised with input from Human Resources and the Council's Occupational Health Service, Waste and Transport Team and Parks Department. It sets out the arrangements and responsibilities' for NBBC employees.

3.4 The COSHH Procedure has been developed to inform managers and employees what they need to do to control health related hazards from hazardous substances. This procedure must be followed for substances identified by the COSHH Regulations. Managers must ensure that any

substances which are covered by COSHH have a risk assessment undertaken prior to use.

- 3.5 The procedure establishes what managers and employees need to do to comply with the legislation.

#### 4 Consultation

- 4.1. Senior managers were consulted on 19th April 2024. Comments were received were considered and the procedure amended where necessary.

- 4.2 The documents were put to the Health and Safety Co-Ordinator's Group (HASCOG) on 25th April 2024, it was agreed the consultation period was to be extended until 10<sup>th</sup> May 2024 due to the local election. HASCOG approved this document on the understanding it did not fundamentally change after consultation which it did not.

- 4.3 The procedure was consulted on with the unions. No comments have been received.

- 4.4 This procedure was approved by Management Team on 25<sup>th</sup> June 2024.

#### 5 Conclusion

- 5.1 To approve the COSHH Procedure.

- 5.2 Once approved the documents will be circulated to all employees and made available on the DASH and Delta systems.

- 5.3 A face to face COSHH Awareness course has been developed by Corporate Safety. There is also e-learning on DELTA. Managers/supervisors responsible for the COSHH assessments will be required to undertake training. This will be monitored by Corporate Health & Safety.

- 5.4 Corporate Health & Safety will support teams to meet the requirements laid out in this procedure.

#### 6 Appendices

Appendix A – COSHH Procedure

- 7 Background Papers none

Alastair Blunkett

Assistant Director – Environment and Enforcement

# Control of Substances Hazardous to Health Procedure (COSHH)

<b>Contents</b>	<b>Page</b>
1. Introduction	3
2. COSHH Assessment Procedure Flowchart	4
3. COSHH Assessment Procedure	5
4. Manager/Assessor Role	5
5. Identifying COSHH substances	5-6
6. Preventing Exposure	6-7
7. Health Surveillance	7
8. Storage and Disposal	7
9. Implementation and Monitoring	8
10. Evaluation/Action Matrix	8

**Document History: -**

<b>Approval/Consultation</b>	<b>Date</b>
HASCOG	25 <sup>th</sup> April 2024
Management Team	25 <sup>th</sup> June 2024

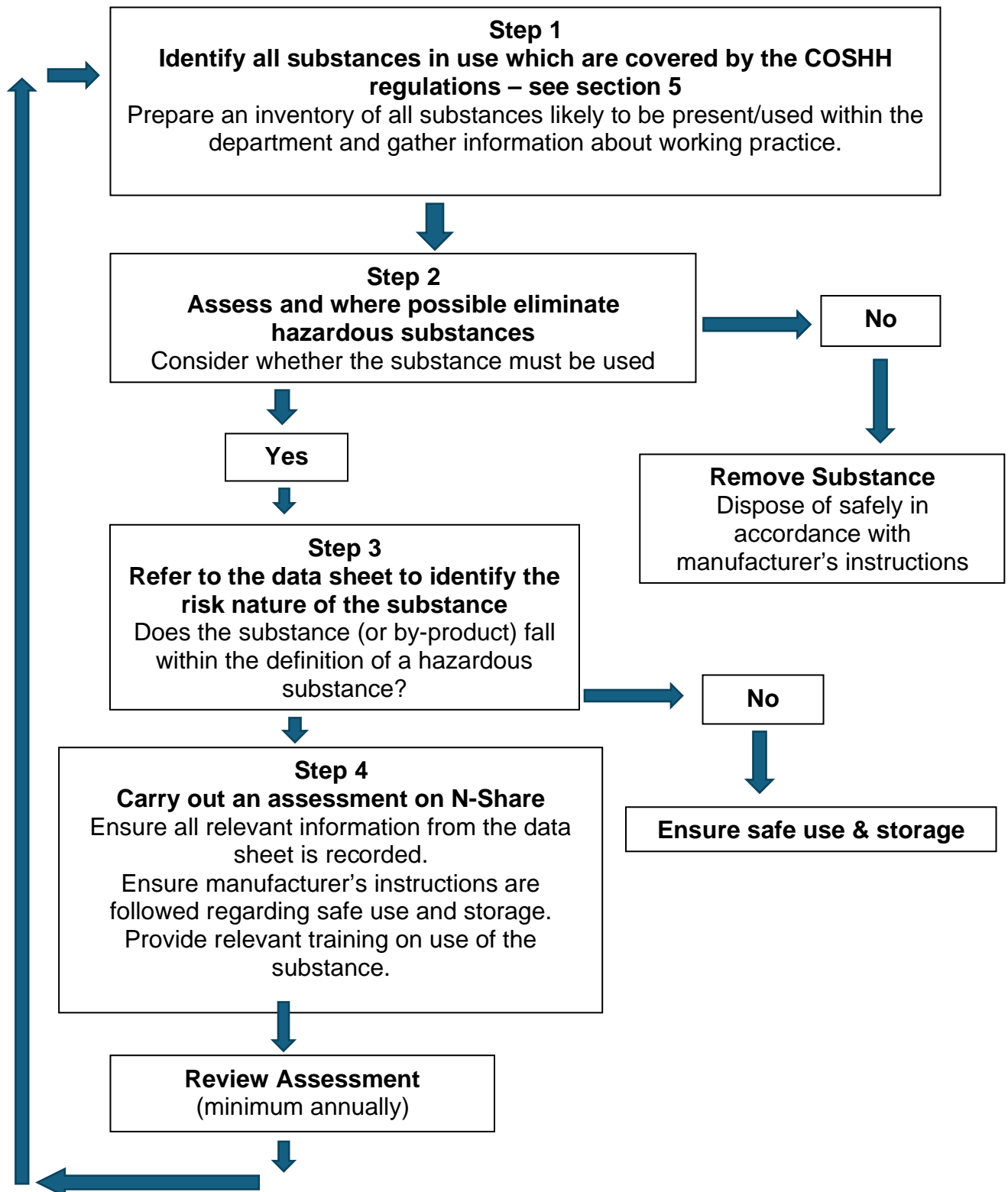


## 1. Introduction

- 1.1 This procedure is designed to assist with any COSHH assessment within Nuneaton and Bedworth Borough Council (NBBC). It is the managers responsibility to ensure hazardous substances within their area of control are responsibly managed in line with the COSHH Regulations 2002.
- 1.2 Employees are exposed to a variety of substances at work (chemicals, fumes, dusts or fibres) which have the potential to have a harmful effect on their health. If exposure to a hazardous substance is not properly controlled it may cause ill health. The substance may cause harm by:
- too much being taken into the body through breathing
  - being absorbed through the skin
  - being swallowed
  - acting directly on the body at the point of contact, e.g. the skin.
- 1.3 Some illnesses caused by exposure to hazardous substances in the workplace (occupational diseases) may not appear until a long time after the first exposure. Therefore, it is important to know in advance how to protect the health of people working with hazardous substances and also other people who may be affected by the work being carried out.
- 1.4 Managers must ensure that any substance required for work purposes are obtained through proper channels and a risk assessment of their use has been undertaken prior to use.
- 1.5 Hazardous substances can take many forms and include:
- **Chemicals**
  - **Products containing chemicals**
  - **Fumes**
  - **Dusts**
  - **Vapours**
  - **Mists**
  - **Gases and Asphyxiating Gases**
  - **Biological agents**

COSHH does not cover lead, asbestos or radioactive substances because these have their own specific regulations.

## 2. COSHH Assessment Procedure Flowchart



### **3. COSHH Assessment Procedure**

- 3.1 The use of substances covered by COSHH that cannot be eliminated or substituted with a less hazardous substance must be risk assessed, the flowchart in section 2 outlines the steps in the Council's COSHH procedure.
- 3.2 Having established that the substance requires a COSHH assessment, the manager/assessor must undertake a COSHH assessment on N-share using the information on the current Safety Data Sheet of the product.
- 3.3 Once the Assessment is complete the data sheet can be uploaded to that assessment in supporting documents.
- 3.4 A manager/assessor must ensure that a COSHH file with the assessments and data sheets will be produced and kept where the products are stored so they are accessible to the employees using the products.

### **4. Manager/Assessor Role**

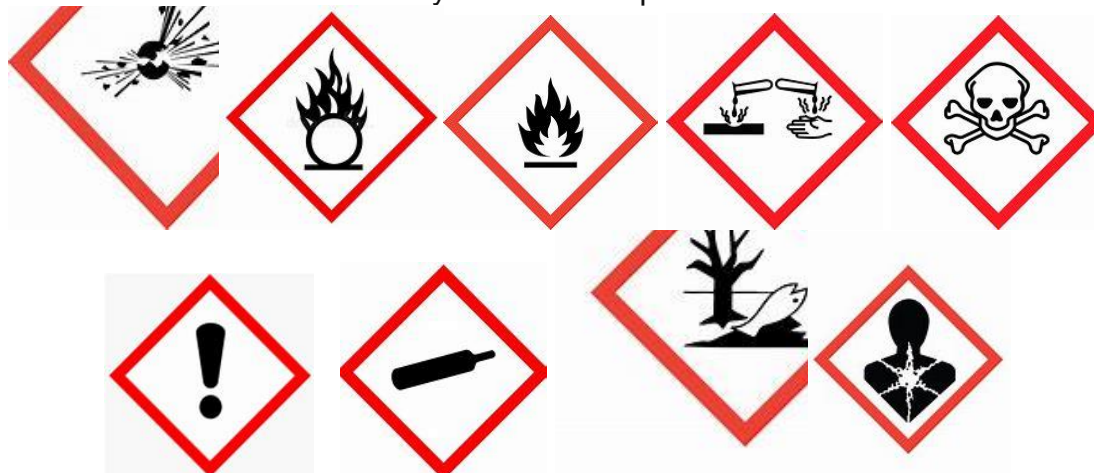
- 4.1 One of the principal duties relating to COSHH is the need for employers to determine the extent to which employees can be exposed to hazardous substances and to ensure such exposure is either eliminated, reduced or adequately controlled.
- 4.2 Managers should ensure all chemicals used are assessed and that the information is available to all parties. Managers may delegate these tasks to assigned COSHH assessors in their teams, however they will remain accountable for ensuring all tasks are undertaken correctly.
- 4.3 Any equipment, PPE or storage requirements identified on the COSHH Assessment must be put into place and available.
- 4.4 Managers also have a responsibility to manage exposure to harmful products – please see section 6.
- 4.5 Managers/Assessors need to undertake regular reviews of products and update or remove COSHH assessments when required.
- 4.6 When purchasing new products these will need to be assessed before use.

### **5. Identifying Substances which fall under COSHH.**

- 5.1 Only substances that fall under the categories below require an assessment in line with the COSHH regulations and NBBC's COSHH procedures.
- 5.2 The COSHH regulations identify the following categories of hazardous substances, these are:
  - Explosives
  - Oxidiser
  - Flammable

- Corrosive
- Toxic
- Irritant
- Compressed Gas
- Environmentally Hazardous
- Health Hazard

5.3 One or more of these symbols will be present on the label:



5.4 The following substances will also require a COSHH assessment:

- Substances with a specified working exposure limit (WEL) – please refer to section 6.
- Biological agents creating health hazards (bacteria & other micro-organisms) where they are directly connected with work or if exposure is incidental to the work activity.
- Any dust at a substantial concentration in the air.
- Any other substance which create a comparable health hazard including occupational asthma.

## 6. Preventing Exposure

6.1 Managers should enquire with suppliers if a less hazardous alternative is available if a substance has been identified as high risk after assessment.

6.2 For any hazardous substance, managers must take measures to prevent exposure. This may be achieved by:

- **Elimination of the substance** by changing the process or activity so the substance isn't needed or generated.
- **Replacing the substance** with a less hazardous substance or a different form of the same substance that presents no or less risks to health.
- **Modifying the process** to eliminate the production of hazardous by-products or waste products.

- 6.3 If it is not reasonably practicable to prevent exposure than the risks must be adequately controlled.
- 6.4 Managers should work to prevent or minimise exposure by:
- Implementing the control measures identified in the risk assessment and COSHH assessment.
  - Having clear safe systems of work processes in place.
  - Ensuring PPE is available and used appropriately.
  - Ensuring all training regarding the use of products and the risks associated with harmful substances is available and undertaken.
  - Ensuring there all relevant signage in place including no eating, drinking or smoking in the area.
- 6.5 Some substances have a specified working exposure limit (WEL). These are permissible maximum airborne concentrations averaged over a period of time that employees may be exposed to by inhalation. The list is set by the HSE and is legally binding under COSHH, the list can be found in [EH40/2005 Workplace exposure limits \(hse.gov.uk\)](https://www.hse.gov.uk/e40/2005). Many thousands of substances are used at work but only about 500 substances have WELs. Managers need to be aware of this list and consider if employees are using any of the substances on this list.
- 6.6 Where employees are required to work with a substance with a WEL, the manager must ensure that that limit is not exceeded. To check that exposure to hazardous substances is below their WEL monitoring is required. This means measuring the substance in the air that a worker breathes while they are doing a task.
- 6.7 Absorption through the skin needs to be considered, for example, from a splash onto the skin or clothing. Where a substance with a WEL has 'Sk' notation assigned to it the potential for skin absorption needs to be considered in determining the adequacy of the control measures
- 6.8 For substances with a WEL monitoring is likely to be needed by a competent consultant. If employees work with substances with a WEL, Corporate Health & Safety Team should be made aware by the manager so that appropriate advice can be given.

## **7. Health Surveillance**

- 7.1 Health surveillance is only required if it is medically possible to detect the disease or health effect using objective criteria. Further guidance in health surveillance can be sought from Occupational Health in liaison with Corporate Health & Safety Team.
- 7.2 As with exposure monitoring health surveillance is a selective requirement and the need is dependant on the individual circumstances. There must be a reasonable likelihood that the disease or ill effect associated with exposure will occur in the work area concerned. Where risk assessment has identified

the need for health surveillance managers must contact Corporate Health & Safety who will work with Occupational Health for the appropriate health surveillance programme.

## **8. Storage and Disposal**

8.1 The COSHH assessment and safety data sheet will contain information on the safe storage of substances. Even if a substance does not need to have a COSHH assessment carried out, attention should still be given to ensuring correct storage and disposal method as detailed in the Safety Data Sheet.

8.2 The cupboard for storing substances under COSHH should be ventilated where appropriate and lockable with suitable warning signs. There should be an index list of the contents of the cupboard posted on the door and a folder with copies of the COSHH assessments and safety data sheets for the items stored within for immediate reference if needed.

## **9. Implementation and Monitoring**

9.1 Managers should ensure that this procedure is fully implemented in relation to all workplaces and work activities for which they are responsible.

9.2 Managers should monitor the implementation of the COSHH procedures in their respective areas, through reporting and discussion at team meetings.

## **10. Evaluation/Action Matrix**

10.1 This matrix is designed to help determine the likelihood and severity of harm that may be expected given certain circumstances. This risk evaluation matrix below must be used when assessing the risks from hazardous substances.



Severity of Harm → Likelihood of Harm ↓	<b>Minor</b> Few people involved. Low injury potential.	<b>Moderate</b> Few People involved. Injury potential: may require medical assistance.	<b>Significant</b> A number of people involved. Injury potential: would result in actual harm.	<b>Serious</b> A large number of people involved. Injury potential: requiring hospital treatment.	<b>Major</b> Number of people involved is irrelevant. Contact with the substance could result in death or permanent harm.
<b>Rare</b> Highly unlikely ever to occur	<b>Minimum Risk</b> Effective control measures in place.	<b>Minimum Risk</b> Control measures may fail. Low numbers may be exposed on an irregular basis	<b>Minimum Risk</b> Effective control measures in place. Moderate numbers exposed infrequently.	<b>Tolerable Risk</b> Lack of effective monitoring of control measures has the potential for ill health leading to permanent disability.	<b>Tolerable Risk</b> Lack of effective monitoring of control measures has the potential for fatal injuries.
<b>Unlikely</b> May occur occasionally	<b>Minimum Risk</b> Low numbers exposed infrequently.	<b>Tolerable Risk</b> Effective control measures in place. Potential for harm is slight.	<b>Tolerable Risk</b> Control measures are effective but if not fully implemented potential for non-permanent ill health.	<b>Moderate Risk</b> Low numbers exposed. Potential for harm includes ill health leading to permanent disability.	<b>Moderate Risk</b> Low numbers exposed. Potential for harm includes fatal injuries.
<b>Possible</b> Not expected to happen but is possible	<b>Minimum Risk</b> Low numbers exposed frequently. Potential for harm is insignificant.	<b>Tolerable Risk</b> Low numbers exposed frequently. Potential for harm is slight.	<b>Moderate Risk</b> Low numbers exposed frequently. Cost effective methods of reducing the risks should be considered.	<b>Substantial Risk</b> Low numbers exposed frequently. Urgent action required to reduce the risk.	<b>Substantial Risk</b> Low numbers exposed frequently. Potential for harm includes fatal injuries.
<b>Likely</b> Will probably occur but is not a persistent issue	<b>Tolerable Risk</b> Large numbers exposed infrequently. Potential for harm is insignificant.	<b>Moderate Risk</b> Large numbers exposed infrequently. Cost effective methods of reducing the risks should be considered.	<b>Substantial Risk</b> Large numbers exposed infrequently. Potential for harm included temporary disability. Urgent action required to reduce the risk.	<b>Substantial Risk</b> Large numbers exposed infrequently. Potential for harm included permanent disability. Urgent action required to reduce the risk.	<b>Intolerable Risk</b> Large numbers exposed infrequently. Potential for harm includes fatal injuries. Substance shall NOT be used until the risk has been reduced.
<b>Almost Certain</b> Likely to occur on many occasions	<b>Tolerable Risk</b> Large numbers exposed frequently. Potential for harm is insignificant.	<b>Moderate Risk</b> Large numbers exposed frequently. Potential for harm includes headaches etc. Cost effective methods of reducing the risks should be considered.	<b>Substantial Risk</b> Large numbers exposed frequently. Potential for harm included temporary disability. Urgent action required to reduce the risk.	<b>Intolerable Risk</b> Large numbers exposed frequently. Potential for harm included permanent disability. Substance shall NOT be used until the risk has been reduced.	<b>Intolerable Risk</b> Large numbers exposed frequently. Potential for harm includes fatal injuries. Substance shall NOT be used until the risk has been reduced.

**Cabinet/Individual Cabinet Member Decision**

**Report Summary Sheet**

<b>Date:</b>	31 <sup>st</sup> July 2024
<b>Subject:</b>	Health Surveillance Policy
<b>Portfolio:</b>	Public Services
<b>From:</b>	Assistant Director – Environment and Enforcement

<p><b>Summary:</b></p> <p>This report is to present the Health Surveillance Policy for consideration and approval.</p>
<p><b>Recommendations:</b></p> <p>That the Health Surveillance Policy (Appendix A) is approved.</p>
<p><b>Options:</b></p> <ol style="list-style-type: none"> <li>1. Approve the policy, which will ensure that the health of employees engaged in work activities which may cause ill health are adequately monitored.</li> <li>2. Do not approve the policy, which could expose the Council to health and safety risks.</li> </ol>
<p><b>Reasons:</b> Nuneaton and Bedworth Borough Council (NBBC) has obligations to ensure the health, safety and well-being of every employee and others that may be affected by the organisations activities so far as is reasonably practicable. The Health Surveillance Policy will ensure that the Council has adequate systems for the monitoring the health of employees engaged in work activities, which potentially may cause ill health.</p>



**Consultation undertaken with Members/Officers/Stakeholders**

Internal Consultation has taken place with relevant employees, management and trade unions.

**Subject to call-in:** Yes

**Ward relevance:** All

**Forward plan:** No

**Building a Better Borough Aim:** 1

**Building a Better Borough Priority:** 1

**Relevant statutes or policy:**

Health and Safety at Work etc. Act 1974 and regulations made under this Act.

**Equalities Implications:** None.

**Human resources implications:** None

**Financial implications:** None

**Health Inequalities Implications:** None

**Section 17 Crime & Disorder Implications:** None

**Risk management implications:** None

**Environmental implications:** None

**Legal implications:**

This Policy has been designed to ensure the Council complies with the following legislation and other relevant legislation:

- Health & Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- Control of Substances Hazardous to Health Regulations 2002 (COSHH)
- Control of Vibration at Work Regulations 2005
- Control of Noise at Work Regulations 2005
- Control of Asbestos Regulations 2012
- Provision and Use of Work Equipment Regulations 1998
- Personal Protective Equipment Regulations 2022

**Contact details: Rachel Fleeson– Head of Safety and Environmental Health**

**024 76376402**

[rachel.fleeson@nuneatonandbedworth.gov.uk](mailto:rachel.fleeson@nuneatonandbedworth.gov.uk)

**Alastair Blunkett-Assistant Director – Enforcement and Environment**

**024 76376233**

[alastair.blunkett@nuneatonandbedworth.gov.uk](mailto:alastair.blunkett@nuneatonandbedworth.gov.uk)

## AGENDA ITEM NO. 6

### NUNEATON AND BEDWORTH BOROUGH COUNCIL

**Report to:** Councillor R Roze - 31<sup>st</sup> July 2024

**From:** Assistant Director – Environment and Enforcement

**Subject:** Health Surveillance Policy

**Portfolio:** Public Services (Councillor Robert Roze)

**Building a Better Borough Aim: 1**

**Building a Better Borough Priority: 1**

---

#### 1 Purpose of Report

1.1 The purpose of this report is to present the Council's Health Surveillance Policy for consideration and approval.

#### 2 Recommendations

2.1 That the Health Surveillance Policy in Appendix A to this report is approved.

#### 3 Background

3.1 NBBC did not have a policy for Health Surveillance, the processes were included in the Hand, Arm, Vibration Policy 2010, COSHH Guidance 2010 & Control of Noise at Work Procedure 2008.

3.2 To make health surveillance easier to manage it was felt necessary to write this policy to ensure that the Council has adequate systems for the health surveillance of employees and to comply with legal obligations supported by the separate procedures for Hand Arm Vibration, Noise and COSHH.

3.3 The principal aim of the Health Surveillance Policy is the prevention of ill health in the workplace through:

- Assisting with the identification and management of health risks
- Supporting employees who are ill to remain at or return to work.
- The promotion of good health to assist employees in working safely and to make informed choices.

3.4 The policy was written with input from Human Resources and the Council's Occupational Health Service. It sets out the arrangements and responsibilities' in NBBC.

3.5 The policy establishes what managers and employees need to do to comply with the legislation.

#### 4 Consultation

4.1. Senior managers were consulted on 19th April 2024. Comments were received were considered and the policy changed amended where necessary .

4.2 The documents were put to the Health and Safety Co-Ordinator's Group (HASCOG) on 25th April 2024, it was agreed the consultation period was to be extended until 10<sup>th</sup> May 2024 due to the local election. HASCOG approved this document on the understanding it did not fundamentally change after consultation which it did not.

4.3 The policy was consulted on with the unions. No comments have been received.

4.4 This policy was approved by Management Team on 25<sup>th</sup> June 2024.

#### 5 Conclusion

5.1 To approve the Health Surveillance Policy.

5.2 Once approved the documents will be circulated to all employees and made available on the DASH and Delta systems.

5.3 Corporate Health & Safety will support teams to meet the requirements laid out in this policy.

#### 6 Appendices Appendix A – Health Surveillance Policy

#### 7 Background Papers - none

Alastair Blunkett

Assistant Director – Environment and Enforcement



<b>Contents</b>	<b>Page</b>
<b>1. Purpose</b>	<b>4</b>
<b>2. Legislation</b>	<b>4</b>
<b>3. Scope</b>	<b>4</b>
<b>4. Pre-employment questionnaires</b>	<b>4-5</b>
<b>5. Health surveillance</b>	<b>5</b>
<b>6. The referral process to Occupational Health</b>	<b>5-6</b>
<b>7. Medical examinations &amp; assessments</b>	<b>6-8</b>
<b>8. GP medical records</b>	<b>7</b>
<b>9. Health surveillance records</b>	<b>7</b>
<b>10. Retention of records</b>	<b>7</b>
<b>11. Responsibilities</b>	<b>7-9</b>

Links:

Hand Arm Vibration Procedure

Noise Procedure

COSHH Procedure

## **Purpose**

- 1.1 Nuneaton & Bedworth Borough Council (NBBC) are committed to the protecting the health and wellbeing of employees, through the provision of health surveillance for employees where it has been identified, as necessary.
- 1.2 The principal aim of this policy is the prevention of ill health in the workplace through:
  - Assisting with the identification and management of health risks.
  - Explaining the responsibilities for health surveillance.

## **2. Legislation**

- 2.1 This Policy has been designed to ensure the Council complies with the following legislation and other relevant legislation:

- Health & Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- Control of Substances Hazardous to Health Regulations 2002 (COSHH)
- Control of Vibration at Work Regulations 2005
- Control of Noise at Work Regulations 2005
- Control of Asbestos Regulations 2012
- Provision and Use of Work Equipment Regulations 1998
- Personal Protective Equipment Regulations 2022

and ensures compliance with NBBC's Health & Safety Policy.

## **3. Scope**

- 3.1 NBBC will comply with statutory requirements relating to the health of its employees by:
  - Ensuring that the potential for ill-health or injury from work activities or premises is minimised so far as reasonably practicable.
  - Identifying health risks arising from activities so that suitable control measures and occupational health interventions can be implemented.
  - Providing all employees with the appropriate level of health education and training to ensure they are aware of the nature, causes, effect, and appropriate management of ill health in the workplace.
  - Encouraging a culture where managers take an active interest in the health and wellbeing of their employees.
  - Ensuring early identification and management of work-related ill health.
  - Enabling employees to raise, discuss and manage individual work-related ill health issues through involvement with Human Resources (HR) and Occupational Health Services. Corporate Health and Safety will be notified of any work related ill health and patterns of work related stress.

## 4. Pre-employment Questionnaire

- 4.1 Pre-employment medical questionnaires are sent out to all prospective employees recruited to permanent or temporary posts. HR Support are responsible for ensuring that a questionnaire is sent to each prospective employee for completion and this form **must** be returned directly to HR who will pass it on to Occupational Health.
- 4.2 Arrangements for pre-employment medicals will be made where recommended by the Occupational Health provider.
- 4.3 Where health surveillance will be required Corporate Health & Safety will be informed by the following question in the Starter, Leaver & Transfer form which is submitted via DASH for every employee when they commence employment.

Will the role be subject to health surveillance for  Noise exposure  
 COSHH  
 Hand or Arm Vibration

- 4.4 The Corporate Health & Safety Team will be responsible for all arrangements with Occupational Health pertaining to health surveillance to meet the requirements of this policy. These arrangements include:
- Health surveillance including hand arm vibration, spirometry (lung function tests) and audiometry.
  - Medical examinations and assessments.

## 5. Health Surveillance

- 5.1 Health surveillance is a system of on-going health checks. These health checks may be required by law for employees who are exposed to vibration, noise, solvents, fumes, dust, biological agents, or other substances hazardous to health.
- 5.2 Health surveillance is important for:
- Detecting ill-health effects at an early stage so better control measures can be implemented.
  - Providing data to help evaluate health risks.
  - Enabling employees to raise concerns about how work affects their health.
  - Highlighting gaps in workplace control measures which informs the risk assessment.
  - Provides an opportunity to reinforce training for employees.

## 6. The Referral Process to Occupational Health.

- 6.1 Where a job role has been identified as needing health surveillance by Corporate Health & Safety and Occupational Health, a risk assessment



should be carried out by the manager to identify control measures to reduce exposure. Health surveillance should not be used as a substitute for risk assessments or safe systems of work.

- 6.2 Current posts identified as requiring health surveillance are detailed on a spreadsheet held by Corporate Health & Safety. This spreadsheet is kept current through the Starter, Leaver & Transfer forms submitted when an employee starts with or leaves the Council.
- 6.3 Where a post has been identified as needing health surveillance this will be scheduled to allow relevant employees to attend during work time. Managers must allow time off to attend occupational health appointments or for annual health surveillance if needed.
- 6.4 Those that require health surveillance will be notified by Occupational Health by letter to attend appointments within their working day. These letters are distributed by the line manager when required, with Corporate Health & Safety arranging suitable facilities.
- 6.5 If an employee fails to attend or gives insufficient notice to change an Occupational Health appointment, the employees service area may be re-charged from their budgets by HR.
- 6.6 Managers must NOT instigate a health surveillance referral without going through Corporate Health & Safety.
- 6.7 Referrals for medical examinations as defined under this policy by Occupational Health will be arranged through Corporate Health & Safety in consultation with the employee's Line Manager.
- 6.8 Occupational Health will arrange an appointment with the employee and will consider and provide the referring officer with information regarding:
  - The employee's ability to carry out their duties, if applicable.
  - Recommendations relating to the type of work which the employee can do, if applicable.
  - Recommendations which may be necessary to enable the employee to continue in employment, if applicable.
- 6.9 Where an employee refuses to co-operate to undergo health assessments or providing medical evidence, managers are encouraged to try to persuade the employee to attend. Employees who have concerns about referral can liaise with their Line Manager in the first instance.

## **7. Medical Examinations and Assessments**

- 7.1 Where health surveillance assessment forms indicate a need, arrangements for medicals with Occupational Health will be made where necessary. Employees may be requested to attend medicals in connection with statutory health surveillance.

- 7.2 Employees unable to attend an appointment for health surveillance MUST give 72 hours (three working days) to their manager. If Occupational Health arrange appointments directly with an employee, the employee can cancel appointments directly with Occupational Health giving at least 48 hours' notice (two working days).
- 7.3 Health Surveillance reports from Occupational Health will be returned to Corporate Health & Safety. This will be passed to the employee, their Line Manager and HR to action the recommendations. Should further information or clarification be required it is the responsibility of Corporate Health & Safety to liaise with Occupational Health for this explanation .
- 7.4 Where, in the opinion of Occupational Health, an employee is unable to carry out their duties on medical grounds arising from health surveillance, Corporate Health & Safety will be advised of this and will refer the case over to HR to support the line manager and employee.

## **8. GP Medical Records**

- 8.1 Occupational Health may request personal medical records from the employee's GP. The employee must give written consent. The purpose of requesting such reports is to give Occupational Health all possible information to reach a considered decision about the employee's fitness for work. These records will remain confidential with Occupational Health.

## **9. Health Surveillance Records**

- 9.1 It is important to maintain adequate records of health surveillance as they provide:
- Historical information of tasks involving exposure to substances or processes
  - Information for the Health & Safety Executive (HSE) inspectors
- 9.2 Records must contain the following information as a minimum:
- Full name
  - Date of Birth
  - Sex
  - National Insurance number
  - Date present post started
  - Historical information of tasks involving exposure to substances or processes
  - Conclusions of health surveillance procedures and the date on which and by whom they were carried out
  - Conclusion to indicate whether fit to work or the restrictions/recommendations made by Occupational Health
- 9.3 Health surveillance records do not contain confidential clinical details and are kept in the individuals HR record in Content Manager.

## **10. Retention of Records**

- 10.1 Individual health records need to be kept whilst the employee is under health surveillance. Upon leaving NBBC employees with the originals being destroyed after seven years.
- 10.2 Certain regulations (Asbestos /COSHH) require records to be retained for up to 40 years due to latent health effects.

## **11. Responsibilities of Managers, Employees, Corporate Health & Safety, Occupational Health and Human Resources.**

### **Managers**

- 11.1 Will ensure that the health of their staff is not adversely affected by their work through:
- Proactively considering the effect of work activities on health, so enabling the introduction of appropriate control measures to eliminate/minimise any adverse impact.
  - Ensuring risk assessments are undertaken that consider work-related health hazards.
  - Arranging for the provision of appropriate information, instruction, and training to employees with regards to health risks and good practice.
  - Ensure health monitoring provision is in place and being utilised correctly.
  - Ensuring the early intervention and management of work-related ill-health issues

### **Employees**

- 11.2 Employees are responsible for:
- The care of their own health and wellbeing.
  - Making informed life choices with regards their health.
  - Informing their manager of any health condition and/or changes to prescribed medication that might affect or be affected by their work activities, the workplace or other persons.
  - Co-operating with their managers and others with regards the implementation of appropriate measures to control health risks in the workplace.
  - Co-operate with health monitoring.
  - Attend Occupational Health appointments if requested, as required in their conditions of service.

### **Corporate Health and Safety**

- 11.3 Corporate Health & Safety are responsible for:

- Managing the annual health surveillance programme with Occupational Health.
- Advising managers regarding the assessment of health risks and the identification of appropriate control measures.
- Providing and assisting with information and training to managers and staff with regards the identification and management of health risks.
- Updating managers on changes to relevant health and safety legislation, best practice and guidance concerning work related health matters.
- Reporting all cases of diagnosed occupational diseases linked with exposure to work related hazards to the Health & Safety Executive.

### **Occupational Health Service**

- 11.4 Occupational Health will provide advice on:
- Assess the health surveillance forms submitted
  - Arrange follow up appointments regarding issues highlighted from the health surveillance forms
  - Give guidance and advice on medical issues.

Complex cases may require a meeting between Occupational Health, an HR Adviser and the Line Manager or Assistant Director to allow complex issues to be discussed to identify the best way forward.

### **Human Resources**

- 11.5 For health surveillance HR are responsible for:
- Ensuring that managers and staff are aware of the Occupational Health Service.
  - Supporting line managers, Corporate Health & Safety and employees implement Occupational Health requirements.
  - Supporting employees and line managers where Occupational Health determine through health surveillance an employee is unable to continue undertaking their duties.

### **Contractors**

- 11.6 Contractors are responsible for their own health surveillance and monitoring and should have their own arrangements in place. NBBC will not refer a contractor to Occupational Health for Health Surveillance.

---

**Cabinet/Individual Cabinet Member Decision**

---

**Report Summary Sheet**

<b>Date:</b> 31 <sup>st</sup> July 2024
<b>Subject:</b> Noise Management Procedure
<b>Portfolio:</b> Public Services
<b>From:</b> Assistant Director – Environment and Enforcement

<b>Summary:</b> <p>This report is to present the revised Noise Management Procedure for consideration and approval.</p>
<b>Recommendations:</b> <p>That the revised Noise Management Procedure (Appendix A) is approved.</p>
<b>Options:</b> <ol style="list-style-type: none"><li>1. Approve the procedure, which will ensure that the Council has adequate systems for the control of noise at work.</li><li>2. Do not approve the procedure, which could expose the Council to health and safety risks.</li></ol>
<b>Reasons:</b> Nuneaton and Bedworth Borough Council (NBBC) has obligations to ensure the health, safety and well-being of every employee and others that may be affected by the organisations activities so far as is reasonably practicable. This Noise procedure will ensure that the Council has adequate systems for control of noise from work activities.

**Consultation undertaken with Members/Officers/Stakeholders**

Internal Consultation has taken place with relevant employees, management and trade unions.

**Subject to call-in:** Yes

**Ward relevance:** All

**Forward plan:** No

**Building a Better Borough Aim:** 1

**Building a Better Borough Priority:** 1

**Relevant statutes or policy:**

Health and Safety at Work etc. Act 1974.

Control of Noise at Work Regulations 2005.

**Equalities Implications:** None.

**Human resources implications:** None

**Financial implications:** None

**Health Inequalities Implications:** None

**Section 17 Crime & Disorder Implications:** None

**Risk management implications:** None

**Environmental implications:** None

**Legal implications:** None

**The Control of Noise at Work Regulations 2005** set out duties that employers have towards their employees and others to identify and manage noise in the workplace.

**Contact details: Rachel Fleeson– Head of Safety and Environmental Health**

**024 76376402**

[rachel.fleeson@nuneatonandbedworth.gov.uk](mailto:rachel.fleeson@nuneatonandbedworth.gov.uk)

**Alastair Blunkett-Assistant Director – Enforcement and Environment**

**024 76376233**

[alastair.blunkett@nuneatonandbedworth.gov.uk](mailto:alastair.blunkett@nuneatonandbedworth.gov.uk)

## AGENDA ITEM NO. 7

### NUNEATON AND BEDWORTH BOROUGH COUNCIL

**Report to:** Councillor - R Roze - 31<sup>st</sup> July 2024

**From:** Assistant Director – Environment and Enforcement

**Subject:** Noise Management Procedure

**Portfolio:** Public Services (Councillor Robert Roze)

**Building a Better Borough Aim: 1**

**Building a Better Borough Priority: 1**

---

#### 1 Purpose of Report

1.1 The purpose of this report is to present the Council's Noise Management Procedure for consideration and approval.

#### 2 Recommendations

2.1 That the Noise Management Procedure in Appendix A to this report is approved.

#### 3 Background

3.1 The Noise Management Procedure was last reviewed in 2008. It was felt necessary to review the procedure to ensure that the Council has adequate systems for the control of noise exposure at work and to comply with legal obligations.

3.2 The principal aim of the Noise Management Procedure is the prevention of hearing loss in the workplace through:

- Assisting with the identification and management of noise exposure.
- Supporting employees who work in noisy environments.

3.3 The procedure was revised with input from Human Resources and the Council's Occupational Health Service, Waste and Transport, Parks and Responsive Repairs Departments. It sets out the arrangements and responsibilities' for NBBC employees.

3.4 This Noise Management Procedure has been developed to inform managers and employees what they need to do to control hazards from noise exposure.



It must be followed for instances identified by the Control of Noise at Work Regulations 2005. Managers must ensure that any work activity which has the potential to exceed the exposure limit has a risk assessment undertaken prior to use.

- 3.5 The procedure establishes what managers and employees need to do to comply with the legislation.

#### 4 Consultation

- 4.1. Senior managers were consulted on 19th April 2024. Comments were received were considered and the procedure amended where necessary.

- 4.2 The documents were put to the Health and Safety Co-Ordinator's Group (HASCOG) on 25th April 2024, it was agreed the consultation period was to be extended until 10<sup>th</sup> May 2024 due to the local election. HASCOG approved this document on the understanding it did not fundamentally change after consultation which it did not.

- 4.3 Following HASCOG, the Noise Management Procedure was sent to the unions for consultation. No comments have been received.

- 4.4 This procedure was approved by Management Team on 25<sup>th</sup> June 2024.

#### 5 Conclusion

- 5.1 To approve the Noise Management Procedure.

- 5.2 Once approved the documents will be circulated to all employees and made available on the DASH and Delta systems.

- 5.3 Corporate Health & Safety will support teams to meet the requirements laid out in this procedure.

#### 6 Appendices

Appendix A – Noise Management Procedure

- 7 Background Papers none

Alastair Blunkett

Assistant Director – Environment and Enforcement

# Noise Management Procedure

<b>Contents</b>	<b>Page</b>
<b>1. Introduction</b>	<b>3</b>
<b>2. Six Steps to Noise Assessment Flowchart</b>	<b>4</b>
<b>3. Guidelines</b>	<b>5-6</b>
<b>4. Associated Relevant Legislation</b>	<b>6</b>
<b>5. Responsibilities</b>	<b>6-7</b>
<b>6. Additional Sources of Information</b>	<b>8</b>

## **Appendices**

<b>A. Typical Personal Noise Exposure Form</b>	<b>9</b>
<b>B. Action Levels</b>	<b>10</b>

## **Document History: -**

<b>Approval/Consultation</b>	<b>Date</b>
HASCOG	10 <sup>th</sup> November 2005
Borough Safety Committee	6 <sup>th</sup> December 2005
Reviewed	April 2008
Reviewed	April 2024
HASCOG	25 <sup>th</sup> April 2024
Management Team	25 June 2024

## 1. Introduction

- 1.1 Constant exposure to loud noise may damage employees' hearing. Hearing loss can be temporary or permanent, even if the hearing recovers after time this should not be ignored as it is a sign hearing is being damaged. As well as hearing loss employees may develop Tinnitus (ringing, whistling, buzzing or humming sounds in the ears).
- 1.2 Factors that contribute to hearing damage are:
- Noise levels (measured as decibels (dB)).
  - How long employees are exposed to the noise, daily and over several years.
- 1.3 Nuneaton & Bedworth Borough Council (NBBC) is committed to protecting employees from noise hazards and will comply with the relevant guidance in The Control of Noise at Work Regulations 2005 to reduce noise levels to which employees are exposed - see **Appendix A**.
- 1.4 The Control of Noise at Work Regulations 2005 (Noise Regulations 2005) require employers to prevent or reduce risks to health and safety from exposure to noise at work.

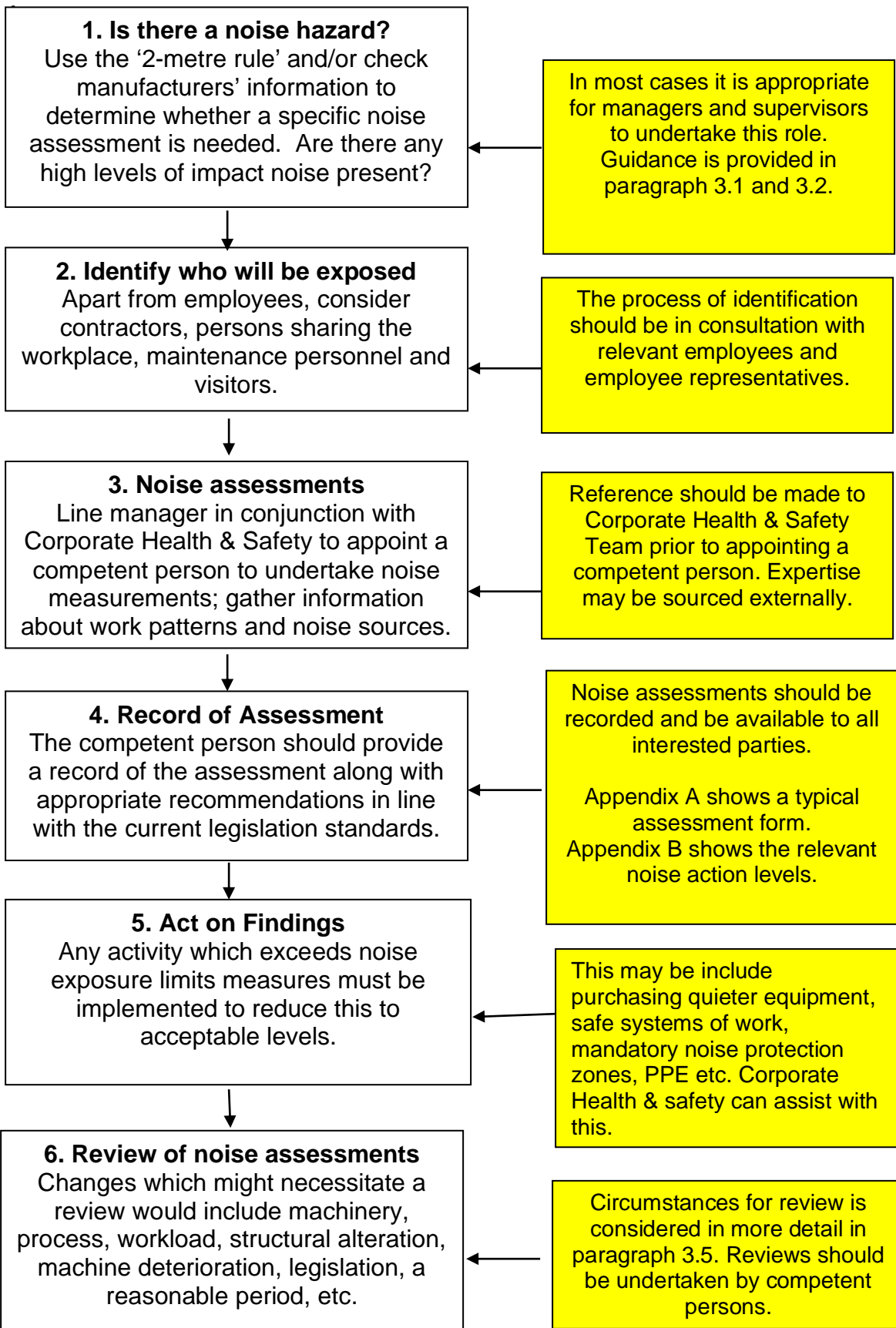
The Regulations require employers to:

- Assess the risks to employees from noise at work.
- Take action to reduce the noise exposure that produces those risks.
- Provide employees with hearing protection if the noise exposure cannot be reduced enough by using other methods.
- Make sure the legal limits on noise exposure are not exceeded.
- Provide employees with information, instruction and training.
- Carry out health surveillance where there is a risk to health.

The Regulations do not apply to:

- Members of the public who are exposed to noise from their non-work or making an informed choice to go to noisy places.
- Low-level noise is a nuisance but causes no risk of hearing damage.

## 2. Six steps to noise assessment and control



### 3.1 **Is a noise assessment needed?**

- 3.1.1 This can usually be determined without having to resort to making detailed noise measurements. A simple test called the '2-metre rule' may be used. If a person must raise their voice to be heard clearly by someone from 2 metres away, there is a noise level which may be hazardous. If the same is observed at 1 metre, then the noise hazard is likely to be a significant risk. Generally, if your voice must be raised in conversation then the level of noise should be formally assessed.
- 3.1.2 Manufacturers and suppliers of equipment have duties to provide the end-user (where the use is work-related) with sufficient information regarding the level of noise that the equipment will create. This information, where the employer is assured of its reliability, may also be used to determine whether a full assessment is necessary.

### 3.2 **Who is likely to be exposed?**

- 3.2.1 This should be a consideration of all persons, not just employees, who may be exposed to hazardous noise levels caused by equipment or processes, for example members of the public, tenants or contractors. This also extends to employees when they work away from the main workplace.
- 3.2.2 Under the Management of Health and Safety at Work Regulations, take account of the risk of noise exposure regarding young persons and new or expectant mothers. These regulations prohibit the employment of workers less than 18 years of age where a risk to health from noise exists.

### 3.3 **Noise assessments**

- 3.3.1 Where it has been identified a noise assessment is needed the line manager will appoint a competent person to carry out a suitable assessment. This may be an external assessor following agreement with the Corporate Health and Safety team. The competent noise assessor must be able to gather and present sufficient and accurate information to enable the correct decisions to be made to comply with the appropriate regulations.
- 3.3.2 The competent person should possess the appropriate knowledge and skill to be able to:
- a. Appreciate the purpose of the assessment.
  - b. Gather all the information that needs to be obtained.
  - c. Know their limitations – this may be knowledge, skills, facilities or resources.
  - d. Make accurate and appropriate measurements.
  - e. Record results.
  - f. Analyse results and explain them to others.
  - g. Understand the range of instrumentation available for the taking of measures; select the appropriate equipment; know how it is used; and how to look after it.
  - h. Interpret information provided by others – this would be used in combination with measurement results to calculate probable noise exposures.

### 3.4 **Recording the findings**

- 3.4.1 The noise assessment must be recorded an example of a noise exposure form is given in **Appendix A**. This could be completed by an external competent assessor.

### 3.5 **Act on findings**

- 3.5.1 If it is found any activity exceeds the noise exposure limits measures must be implemented to reduce this to acceptable levels.

### 3.6 **Review of noise assessments**

- 3.6.1 All assessments of noise will be subject to a review procedure in order that they may be kept up to date. Circumstances which may create the need for review include:

- Installation or removal of machinery.
- Substantial changes in workload, work pattern and exposure time, processed materials, processes or machine speeds.
- Changes in building structure or machinery layout.
- Machine wear or general deterioration.
- Modifications to machinery and introduction of automation.
- Where a person is diagnosed with noise induced hearing loss.
- Where any monitoring indicates that controls appear to be failing.
- After a reasonable period (regardless of the above); HSE guidance suggests this should be about every two years.

## 4. **Relevant Associated Legislation**

### 4.1 **Health and Safety at Work Act 1974**

Employers have a duty to ensure as far as reasonably practicable the health, safety & welfare of their employees and others at work.

The employee also has a responsibility to co-operate with the employer.

### 4.2 **Management of Health and Safety at Work Regulations 1999**

Employers are required to assess any risks that their employees may be exposed to.

### 4.3 **Control of Noise at Work Regulations 2005**

Employers are required to eliminate or reduce risks to health & safety from noise at work. Duties include taking action to reduce noise exposure and not exceeding the legal limits.

## 5. **Responsibilities**

### **Chief Executive, Strategic Directors & Assistant Directors**

- 5.1 In line with the Council's general Health and Safety policy statement, the overall responsibility for health and safety lies with the Chief Executive. Responsibility is delegated to all Strategic Directors and Assistant Directors who will ensure adequate resources for the implementation of this procedure relating to noise hazards as far as is applicable within areas under their control. The Assistant Directors will ensure that all appropriate staff under his/her control are aware of the procedures for managing the hazards associated with noise.

### **Managers**

- 5.2 Managers have a responsibility to protect their employee's health and safety and as such are required to eliminate exposure by their employees wherever possible. Where this is not possible, they must reduce exposure to acceptable levels.

They are:

- Responsible for implementing and maintaining control measures, and to regularly review the available equipment.
- Refer any employee exceeding the stated exposure levels to Corporate Health & Safety for general advice or implementation of health surveillance.
- Responsible for ensuring that when purchasing equipment, the noise levels are factored into the selection process as a primary consideration.
- Responsible for ensuring the on-site measurement regime is carried out on the equipment and the findings are acted upon.
- Responsible for ensuring that tools and equipment are made available for maintenance at the appropriate times and for arranging examination and repair of any equipment that appears to be developing increased noise levels.
- Required to examine and modify work practices to reduce exposures where possible where any employee exceeds the Exposure Action Level Note: work must immediately stop when employees reach the Exposure Limit Level.
- Required to ensure that all new employees appointed to occupations identified (to HR) as those at risk, are subject to pre-employment screening for hearing issues.

### **Supervisors/Team Leaders**

5.3 Supervisors have a responsibility to assist Managers to protect their employee's health and safety and as such are:

- Required to monitor the exposure of their employees to noise and ensure that their records are an accurate and fair representation of the employees' work.
- Required to examine and modify work practices to reduce exposures where possible where any employee exceeds the Exposure Action Level. Note: work must immediately stop when employees reach the Exposure Limit Level
- Required to pass on to their manager information disclosed to them by an employee in relation to symptoms of hearing damage.
- Required to instruct and advise employees on the use of equipment or methods of work which reduce exposure to noise and to enforce this instruction and advice in the workplace.
- 

### **Employees**

5.4 Employees have a responsibility to protect their own health and safety and as such are:

- Required to follow all guidance and instructions regarding the use of noisy equipment and tools, to protect them as much as possible.
- Required to immediately report any indications of hearing damage or hearing related symptoms to their supervisor or manager.
- Required to co-operate with the Council to ensure health surveillance is complete and effective.



## Contractors

- 5.5 Contractors undertaking work on behalf of NBBC are responsible for providing the correct noise protection for their employees appropriate to the task. It is the Contractors responsibility that suitable training is provided, that the equipment is used correctly and properly maintained.

## 6. Additional Sources of Information

### 6.1 Websites

<http://www.hse.gov.uk/>

<http://www.hse.gov.uk/noise/calculator.htm>

### 6.2 References

**Reducing Noise at Work (HSE Guidance L108)**

**Noise at Work: Advice for Employers (INDG362) [1.31Mb]** 

**Sound Solutions: Techniques to reduce noise at work (HSG138)**

**Protect your hearing – or lose it! [353 Kb]**

## Appendix A

### Example Personal Noise Exposure Assessment Form.

<b>EXPOSURE ASSESSMENT</b>	<b>No:</b>	
----------------------------	------------	--

<b>Employee details</b>	
Name:	
Job title:	
Service Unit:	
Location of Assessment:	
Date of measurement:	

<b>Sound level meter details</b>			
Meter model/type number:		Serial Number:	
Last full calibration:			
<b>On-site calibration</b>			
Calibrator type:		Serial Number:	
Last full calibration:			
Calibration level:		Calibration frequency:	

<b>Noise exposure measurements</b>				
Noise sources	L <sub>eq</sub> dB(A)	Exposure time	Fractional exp	Peak (Pa)
<b>Total fractional exposure:</b>				
<b>Total daily exposure L<sub>EP,d</sub> dB(A):</b>				

<b>Assessor details</b>	
Measured/assessed by:	
Signature:	
Date:	

**Action Levels for Occupational Exposure.**

There are three action levels specified by the Control of Noise at Work Regulations 2005. The meeting or exceeding such levels has consequences for the scope of the employer’s duty regarding noise exposure control. As a simple tabular summary, these are:

	Daily or Weekly Noise Exposure dB(A)	Peak Sound Pressure dB(C)	Notes
<b>Lower Exposure Action Level</b>	<b>80</b>	<b>135</b>	<p>If this level is exceeded Managers are required to ensure a noise assessment is carried out by a competent person.</p> <p>Between the lower and upper exposure level employees should be provided with hearing protection if they ask for it.</p>
<b>Upper Exposure Action Level</b>	<b>85</b>	<b>137</b>	<p>Managers are required to control the noise exposure, so far as is reasonably practicable, to below the upper exposure action level, by organizational and technical methods which does <b>NOT</b> include Personal Protective Equipment (hearing protectors).</p> <p>Where hearing protectors are provided as additional protection for noise above the upper exposure level, employers must make sure they are worn.</p> <p>Where employees are likely to be regularly exposed to noise above the upper exposure level, regular health surveillance should be introduced.</p>
<b>Noise Exposure Limit</b>	<b>87</b>	<b>140</b>	<p>These are set to allow for sufficient time to rest and recover from the workday.</p>

**Cabinet/Individual Cabinet Member Decision**

**Report Summary Sheet**

<b>Date:</b> 31 <sup>st</sup> July 2024
<b>Subject:</b> Personal Protective Equipment (PPE) Policy
<b>Portfolio:</b> Public Services
<b>From:</b> Assistant Director – Environment and Enforcement

<b>Summary:</b> <p>This report is to present the Personal Protective Equipment (PPE) Policy for consideration and approval.</p>
<b>Recommendations:</b> <p>That the PPE Policy (Appendix A) is approved.</p>
<b>Options:</b> <ol style="list-style-type: none"><li>1. Approve the policy, which will ensure that the Council meets it's duties under the Personal Protective Equipment at Work Regulations 2022.</li><li>2. Do not approve the policy, which could expose the Council to health and safety risks.</li></ol>
<b>Reasons:</b> Nuneaton and Bedworth Borough Council (NBBC) has obligations to ensure the health, safety and well-being of every employee and others that may be affected by the organisations activities so far as is reasonably practicable. The PPE Policy will ensure that the Council has adequate systems for the use of personal protective equipment.

**Consultation undertaken with Members/Officers/Stakeholders**

Internal Consultation has taken place with relevant employees, management and trade unions.

**Subject to call-in:** Yes

**Ward relevance:** All

**Forward plan:** No

**Building a Better Borough Aim:** 1

**Building a Better Borough Priority:** 1

**Relevant statutes or policy:**

Health and Safety at Work etc. Act 1974 and regulations made under this Act.  
Personal Protective Equipment at Work Regulations 2022

**Equalities Implications:** None.

**Human resources implications:** None

**Financial implications:** None

**Health Inequalities Implications:** None

**Section 17 Crime & Disorder Implications:** None

**Risk management implications:** None

**Environmental implications:** None

**Legal implications:** The Personal Protective Equipment (PPE) at Work Regulations 2022 set out duties that employers have towards their employees and others, to provide PPE, maintain it and provide training. Workers are required to use the PPE provided correctly.

**Contact details: Rachel Fleeson– Head of Safety and Environmental Health**

**024 76376402**

[rachel.fleeson@nuneatonandbedworth.gov.uk](mailto:rachel.fleeson@nuneatonandbedworth.gov.uk)

**Alastair Blunkett-Assistant Director – Enforcement and Environment**

**024 76376233**

[alastair.blunkett@nuneatonandbedworth.gov.uk](mailto:alastair.blunkett@nuneatonandbedworth.gov.uk)

**AGENDA ITEM NO. 8**

**NUNEATON AND BEDWORTH BOROUGH COUNCIL**

**Report to: Councillor Robert Roze - 31<sup>st</sup> July 2024**

**From: Assistant Director – Environment and Enforcement**

**Subject: Personal Protective Equipment (PPE) Policy**

**Portfolio: Public Services (Councillor Robert Roze)**

**Building a Better Borough Aim: 1**

**Building a Better Borough Priority: 1**

---

1 Purpose of Report

1.1 The purpose of this report is to present the Council's Personal Protective Equipment (PPE) Policy for consideration and approval.

2 Recommendations

2.1 That the PPE Policy in Appendix A to this report is approved.

3 Background

3.1 NBBC did not have a policy for PPE, it was felt necessary to create a policy to ensure that the Council has adequate systems for the use of PPE and to comply with legal obligations.

3.2 The principal aim of the PPE Policy is the protection of employees in the workplace through:

- Assisting with the identification of when and what PPE is needed and the management of this equipment.
- Supporting employees who regularly use PPE.

3.3 The policy was written with input from the Waste and Transport, Parks and Responsive Repairs Departments. It sets out the arrangements and responsibilities' for NBBC employees.

3.4 The PPE Policy has been developed to inform managers and employees what they need to do to regarding the use of PPE. This policy must be followed for all equipment identified by the PPE regulations. Managers must ensure that

any activity requiring the use of PPE has a risk assessment undertaken prior to use.

- 3.5 The policy establishes what managers and employees need to do to comply with the legislation.

#### 4 Consultation

- 4.1. Senior managers were consulted on 19th April 2024. Comments received have been considered and the policy amended where necessary.

- 4.2 The documents were put to the Health and Safety Co-Ordinator's Group (HASCOG) on 25th April 2024, it was agreed the consultation period was to be extended until 10<sup>th</sup> May 2024 due to the local election. HASCOG approved this document on the understanding it did not fundamentally change after consultation which it did not.

- 4.3 The policy was consulted on with the unions. No comments have been received.

- 4.4 This policy was approved by Management Team on 25<sup>th</sup> June 2024.

#### 5 Conclusion

- 5.1 To approve the PPE Policy.

- 5.2 Once approved the documents will be circulated to all employees and made available on the DASH and Delta systems.

- 5.3 Corporate Health & Safety will support teams to meet the requirements laid out in this policy.

#### 6 Appendices

Appendix A – PPE Policy

- 7 Background Papers none

Alastair Blunkett

Assistant Director – Environment and Enforcement



# Personal Protective Equipment Policy

## Quality Record

Issue No.	Date	Initial EIA	Stage	Agreed
1	25/4/2024		HASCOG	25 April 2024
			Management Team	25 June 2024
			ICMD	

<b>Contents</b>	<b>Page</b>
<b>1. Introduction</b>	<b>4</b>
<b>2. Purpose</b>	<b>4</b>
<b>3. Responsibilities, Accountabilities &amp; Duties</b>	<b>4-6</b>
<b>4. Implementation</b>	<b>6-8</b>
<b>5. Training</b>	<b>8</b>
<b>6. Monitoring Arrangements</b>	<b>8</b>
<b>7. Occupational Health</b>	<b>8</b>
<b>8. Policy Monitoring</b>	<b>9</b>
<b>9. References</b>	<b>9</b>
<b><i>Appendices</i></b>	
<b>Appendix 1 – PPE Allocation &amp; Signature Form</b>	<b>9</b>

## 1. Introduction

- 1.1 There is a statutory requirement under the Personal Protective Equipment at Work Regulations 1992 (as amended 2002) for personal protective equipment (PPE) to be supplied and used at work where there are risks to health and safety that cannot be adequately controlled in other ways. Safe systems of work, control measures and engineering solutions should be considered first therefore minimising the use of PPE. Where PPE is needed it must be the most appropriate for the identified risk and should only be issued where it further reduces the level of risk.
- 1.2 PPE is 'all equipment (including clothing to protect against the weather) which is intended to be worn or held by a person at work and which protects individuals against one or more risks to their health or safety. (Regulation 2– PPE Regulations).

## 2. Purpose

- 2.1 The purpose of this policy is to set out the requirements for the selection, use and maintenance of PPE. It provides information and advice on the different types of PPE available as well as establishing procedures to minimise the risk of staff to allergies or dermatitis.
- 2.2 The policy applies to all employees employed by Nuneaton & Bedworth Borough Council (NBBC). Some PPE is also covered by more specific regulation e.g. Ear protection is covered under the Control of Noise at Work Regulations 2005 and respiratory protection is covered under the COSHH Regulations 2002 and Confined Spaces Regulations 1997. The advice given in this policy is still applicable, as the general principles of selecting and maintaining suitable PPE and training employees in its use are common to all regulations that refer to PPE.
- 2.3 PPE will be provided free of charge to all employees, agency or casual staff for the duration of their employment.
- 2.4 The primary objective of this policy is to ensure that the legal requirements in the provision of PPE are outlined in more general terms.
- 2.5 This policy should be read in conjunction with the Respiratory Protection Equipment (RPE) policy.

## 3. Responsibilities, Accountabilities & Duties

### Chief Executive

- 3.1 The Chief Executive has specific accountability to ensure that responsibilities for Health and Safety, including the provision of suitable PPE are effectively

Issue Date: Apr 2024	Issue No: V1	Page No: 8
----------------------	--------------	------------

assigned, accepted, and managed at all levels within NBBC consistent with good practice. The responsibility for managing this can be delegated to others within the Council.

### **Strategic Directors/Assistant Directors**

- 3.2 The Strategic and Assistant Directors have the delegated responsibility for the management of Health and Safety, including ensuring that there are suitable and sufficient arrangements and resources for PPE and to ensure this policy is implemented throughout the Council. This can be further delegated to line managers and supervisors.

### **Corporate & Housing Health and Safety Teams**

- 3.3 Corporate & Housing Health and Safety will:
- Provide information and advice on PPE.
  - Follow up on any reported PPE / ill health-related incidents.
  - Report on any hazards, associated with any particular PPE, coming to light during use.
  - Ensure compliance to relevant legislation.

### **Managers**

- 3.4 Managers will, if required, seek advice from a suitably competent person to ensure any requirements related to PPE are implemented and:
- Conduct a workplace risk assessment to identify all workplace hazards which are of significant risk and review the possibilities of reducing the risks by means other than PPE usage.
  - Identify the need for PPE.
  - Research manufacturers and supplier's literature and in conjunction and co-operation with users, select suitable and appropriate equipment.
  - Provide a suitable quantity of PPE with an appropriate stock level being maintained.
  - Provide appropriate PPE cleaning arrangements / regimes where applicable.
  - Provide all employees with instruction/training in correct usage, identification of wear and tear and any known faults together with any maintenance that may be required.
  - Make provision so that users have suitable storage facilities for PPE.
  - Audit and inspect PPE on a periodic basis and record the findings.
  - Maintain records of issue and receipt for PPE. Use a PPE Signature form for the employee to sign for receipt of any issued PPE - see **Appendix 1** for an example form.
  - As appropriate, ensure signage is posted in those areas where the wearing of PPE is compulsory, e.g. Noise zones.

Issue Date: Apr 2024	Issue No: V1	Page No: 9
----------------------	--------------	------------

- Monitor any new PPE coming to the market, which may offer improved protection or acceptance to wear.
- Ensure where mandatory glove use is required employees are aware of this instruction and comply with it.
- Ensure employees are aware of the hazards of latex sensitisation.
- Consideration of visitors to the area and requirement of PPE provision.
- Ensure the PPE does not compromise the safety of employees or property when properly maintained and used.
- Monitor PPE is being used correctly.

## Employees

3.5 All NBBC employees will:

- Co-operate with managers in any PPE selection process.
- Sign for any issued PPE – see **Appendix 1**.
- Ensure that they have the correct PPE available for site visits.
- Wear/use the PPE correctly.
- Carry out PPE maintenance and cleaning where necessary.
- Store the PPE correctly.
- Check all PPE for damage before each use.
- Report any defects or wear and tear.
- Obtain a replacement for lost or damaged equipment.
- Not misuse any PPE issued to them.
- Return any PPE issued should they leave the authority.
- Inform managers if they suffer an adverse reaction or sensitivity when using PPE so that advice can be sought from Occupational Health and / or the staff member's GP.
- Report any reactions / incidents related to PPE use via the reporting system on DASH – select Occupational Illness/Disease.

## Contractors

3.6 Contractors undertaking work on behalf of NBBC are responsible for providing the correct PPE for their employees. It is the Contractors responsibility that suitable training is provided, that the equipment is used correctly and properly maintained.

## 4. Implementation

### 4.1 What types of PPE are available

4.1.1 PPE should be regarded as a 'last line of defence' in terms of protecting against risks to health and safety. Although a risk assessment may identify PPE as being necessary, other means of control should be given preference. PPE must not be relied upon as the sole means of protection.

Issue Date: Apr 2024	Issue No: V1	Page No: 10
----------------------	--------------	-------------

4.1.2 PPE includes but is not limited to the following when they are worn for the protection of health and safety:

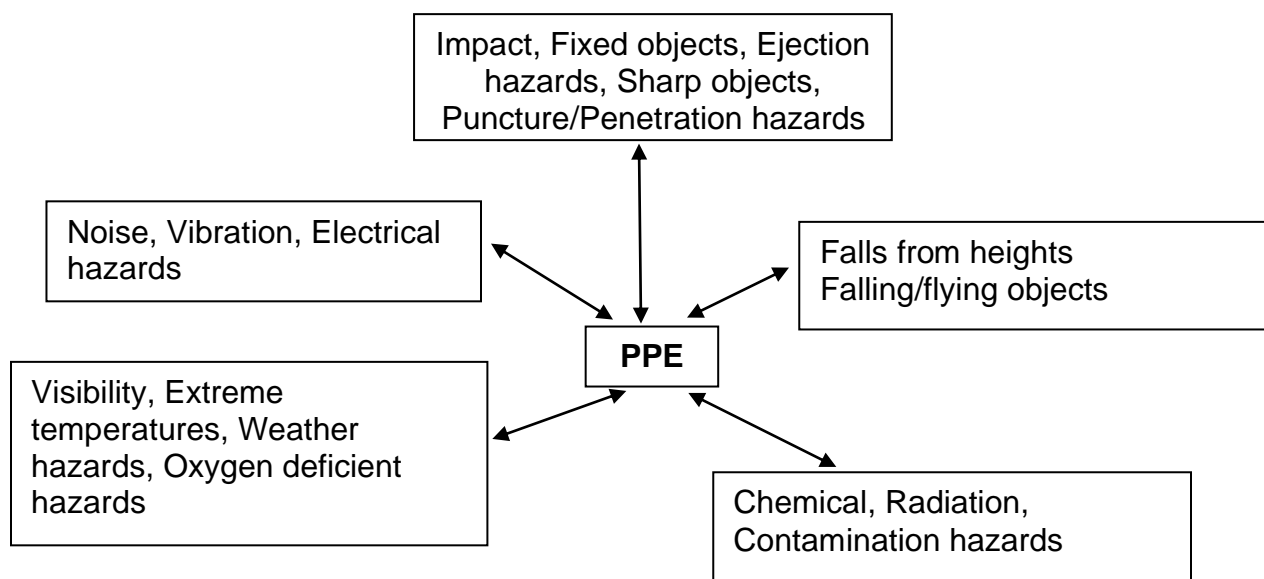
a) Protective clothing, such as:

- Aprons / Overalls
- Clothing for adverse weather conditions – E.g. coats, waterproof trousers.
- Gloves
- Safety footwear – E.g. With protective toe caps or for electrical hazards.
- Safety helmets
- High visibility vests and clothing

b) Protective Equipment, such as:

- Eye protectors – safety glasses or goggles
- Respiratory protective equipment (RPE) – ranging from dust masks to breathing apparatus
- Hearing protection – earmuffs and ear plugs
- Safety harnesses

4.1.3 There may be various types of hazards identified in the risk assessments indicating why PPE is required to be worn, such as:



## 4.2 PPE Selection

4.2.1 PPE should be used if the risk assessment identifies it as an appropriate means of controlling exposure to risks, or if local rules stipulate its use. It must be suitable for its intended use.

The assessment must consider:

- The hazard it is intended to protect against.
- The task to be undertaken. For example, whether the length of time or physical effort whilst wearing the PPE will be an issue.
- Fit requirements for the individual worker.

Issue Date: Apr 2024	Issue No: V1	Page No: 11
----------------------	--------------	-------------

- Its compatibility with any other item of PPE to be worn at the same time.
- Whether the health of the person who will be wearing it has been considered e.g. Asthmatics.
- Whether wearing PPE increases the risk or creates new risks. E.g. Making communication more difficult.

4.2.2 All PPE must conform to an approved standard. Compliance with the standard is identified in the UK by marking items with the UKCA mark or the CE kite mark, in accordance with the Personal Protective Equipment Regulations 2002.

4.2.3 When assessing whether PPE is suitable, Risk Assessors will need to specify on the risk assessment, what type of PPE should be worn. For example, nitrile rubber gloves BS EN 374, eye protection to EN 166 34B, not just 'gloves and goggles'.

#### 4.3 PPE Limitations

- Effective protection is only achieved by using PPE that is suitable for the hazard which it is supposed to protect against. It must be correctly fitted, maintained and properly used.
- PPE protects only the person wearing it, whereas measures controlling the risks at source can protect everyone in the workplace.
- PPE may restrict the wearer to some extent by limiting mobility, visibility or by requiring additional weight to be carried.
- Some items of PPE have limited lifespans such as respiratory protection and hard hats and therefore these should be recorded as part of the PPE inspection. Expired PPE must be replaced. Information on life spans can be obtained from the manufacturer's guidance which accompanies the PPE.
- Latex gloves can cause skin allergies in some users. If an allergy is reported an alternative will be sourced.

#### 4.4 PPE storage

4.4.1 PPE must be stored in a location that does not put the equipment at risk of being damaged or contaminated by damp, sunlight or harmful substances such as solvents.

4.4.2 If PPE becomes contaminated it should be stored separately from ordinary clothing and where necessary be labelled.

### 5. Training

5.1 Suitable training and information should be provided to staff about the correct use and storage of PPE. Records should be kept of PPE issued and the training provided.

Issue Date: Apr 2024	Issue No: V1	Page No: 12
----------------------	--------------	-------------

5.2 Training should be provided by line managers or supervisors or the supplier if the equipment is new.

## 6. Monitoring Arrangements

6.1

Area for Monitoring	How	Who by	Frequency	Reported to
Risk Assessments	During H&S inspections.	Line Manager, Supervisors or Team Leaders	Annually On purchasing a different brand/product After an accident/incident	HASCOG
Correct use of PPE	Random site inspections	Line Manager, Supervisors or Team Leaders	Random but at least once a year	HASCOG
Purchasing PPE	Audit & Stock Checks	Line Manager, Supervisors or Team Leaders	Quarterly	Assistant Directors

6.2 PPE use must be included in any Health & Safety monitoring site inspection records. There is no standard form for site inspections, however there is a site inspection template in H&S Standard Templates and Forms accessible from DASH and Content Manager (DOC19/140805) should one be needed.

## 7. Occupational Health

7.1 Any skin allergies to PPE resulting in dermatitis should be reported using the Reporting an Accident/Incident System in DASH and selecting Occupational Illnesses/Diseases. This will be reported to the Health and Safety Executive (HSE) under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Occupational dermatitis is a reportable disease under RIDDOR. Employees reporting skin reactions should be referred to Occupational Health via Corporate Health & Safety.

## 8. Policy monitoring

8.1 This policy will be reviewed every three years or when legislation requires. The policy is maintained by the Corporate Health & Safety Team.

## 9. References

- Health & Safety at Work Act 1974

Issue Date: Apr 2024	Issue No: V1	Page No: 13
----------------------	--------------	-------------



- Management of Health & Safety at Work Regulations 1999
- Control of Substances Hazardous to Health Regulations 2002 (as amended)
- Control of Noise at Work Regulations 2005
- The Personal Protective Equipment at Work Regulations 1992
- Personal Protective Equipment Regulations 2002
- The Personal Protective Equipment Regulations (amended) 2022
- Confined Spaces Regulations 1997
- The Reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013

**APPENDIX 1**

**PPE Allocation & Signature Form**

**To be completed on receipt or on first day of employment.**

(To be held in personnel file or PPE File)

Name	Job Title	Department

In accordance with the PPE Policy this form is to be signed to acknowledge that I have been given the following PPE and have been trained in its correct use, storage, maintenance and disposal.

PPE	Training received Y/N	Is Storage supplied Y/N	Does it need Maintenance or Servicing Y/N	Size	Number allocated
Disposable Aprons					
Disposable Gloves					
Gloves					
FFP3 Disposable Face Mask*					
Powered Respirator					
Safety Footwear					
Eye Protection					
Head Protection					
Hearing Protection					
Fleece/Light Jacket					
Waterproof Coat					
T-shirt					
Sweatshirt					
Work Trousers					
Hi-Viz Waistcoat					
Hi Viz T-shirt					
Hi-Viz Jumper					
Hi-Viz Waterproof trousers					
Hi-Viz Waterproof Coat					
Hi-Viz Shorts					
Other : Please state					

**\*FFP3 mask will require a face fit test certificate.**

**Signed:**

**Date:**

**Supervisors signature:**

**Date:**

Issue Date: Apr 2024	Issue No: V1	Page No: 15
----------------------	--------------	-------------

---

**Cabinet/Individual Cabinet Member Decision**

---

**Report Summary Sheet**

**Date:** 31<sup>st</sup> July 2024

**Subject:** Respiratory Protective Equipment (RPE) Policy

**Portfolio:** Public Services

**From:** Assistant Director – Environment and Enforcement

**Summary:**

This report is to present the revised Respiratory Protective Equipment (RPE) Policy for consideration and approval.

**Recommendations:**

That the RPE Policy (Appendix A) is approved.

**Options:**

1. Approve the policy, which will ensure that the Council has adequate systems for the use of RPE and to comply with legal obligations.
2. Do not approve the policy, which could expose the Council to health and safety risks.

**Reasons:** Nuneaton and Bedworth Borough Council (NBBC) has obligations to ensure the health, safety and well-being of every employee and others that may be affected by the organisations activities so far as is reasonably practicable. The RPE Policy will ensure that the Council has adequate RPE to protect workers from airborne hazards.

**Consultation undertaken with Members/Officers/Stakeholders**

Internal Consultation has taken place with relevant employees, management and trade unions.

**Subject to call-in:** Yes**Ward relevance:** All**Forward plan:** No**Building a Better Borough Aim:** 1**Building a Better Borough Priority:** 1**Relevant statutes or policy:**

Health & Safety at Work Act 1974

Management of Health & safety at Work Regulations 1999

Control of Substances Hazardous to Health Regulations 2002 (COSHH),

Control of Asbestos Regulations 2012

Personal Protective Equipment Regulations 2022

**Equalities Implications:** None.**Human resources implications:** None**Financial implications:** None

<b>Health Inequalities Implications:</b> None
<b>Section 17 Crime &amp; Disorder Implications:</b> None
<b>Risk management implications:</b> None
<b>Environmental implications:</b> None
<p><b>Legal implications:</b> This Policy has been will ensure the Council complies with the legislation below, in that suitable respiratory protective equipment is used by workers:</p> <ul style="list-style-type: none"> <li>• Health &amp; Safety at Work Act 1974</li> <li>• Management of Health &amp; safety at Work Regulations 1999</li> <li>• Control of Substances Hazardous to Health Regulations 2002 (COSHH),</li> <li>• Control of Asbestos Regulations 2012</li> <li>• Personal Protective Equipment Regulations 2022</li> </ul>

<p><b>Contact details: Rachel Fleeson– Head of Safety and Environmental Health</b>  <b>024 76376402</b>  <a href="mailto:rachel.fleeson@nuneatonandbedworth.gov.uk">rachel.fleeson@nuneatonandbedworth.gov.uk</a></p> <p><b>Alastair Blunkett-Assistant Director – Enforcement and Environment</b>  <b>024 76376233</b>  <a href="mailto:alastair.blunkett@nuneatonandbedworth.gov.uk">alastair.blunkett@nuneatonandbedworth.gov.uk</a></p>
---

## AGENDA ITEM NO. 9

### NUNEATON AND BEDWORTH BOROUGH COUNCIL

**Report to:** Councillor - R Roze 31<sup>st</sup> July 2024

**From:** Assistant Director – Environment and Enforcement

**Subject:** (Name) Policy

**Portfolio:** Public Services (Councillor Robert Roze)

**Building a Better Borough Aim: 1**

**Building a Better Borough Priority: 1**

---

#### 1 Purpose of Report

1.1 The purpose of this report is to present the Council's Respiratory Protective Equipment (RPE) Policy for consideration and approval.

#### 2 Recommendations

2.1 That the RPE Policy in Appendix A to this report is approved.

#### 3 Background

3.1 In September 2022 the HSE reported that a clean-shaven policy regarding RPE was no longer enforceable, meaning that disposable tight fitting FFP3 masks could not be the only masks provided.

3.2 NBBC did not have a policy for RPE, it was felt necessary to create a policy to ensure that the Council has adequate systems for the use of RPE and to comply with legal obligations.

3.3 The principal aim of the Respiratory Protective Equipment (RPE) Policy is the protection of employees in the workplace through:

- Assisting with the identification of when RPE is needed, what type will be provided and the management of this equipment.
- Supporting employees who regularly use RPE.

3.4 The policy was written with input from the Responsive Repairs Department. It sets out the arrangements and responsibilities' for NBBC employees.

3.5 The RPE Policy has been developed to inform managers and employees what they need to do to regarding the use of RPE. This policy must be

followed for all equipment identified by the RPE regulations. Managers must ensure that any activity requiring the use of RPE has a risk assessment undertaken prior to use.

3.6 The policy establishes what managers and employees need to do to comply with the legislation.

#### 4 Consultation

4.1 Senior managers were consulted on 19th April 2024. Comments received were taken into consideration.

4.2 The documents were put to the Health and Safety Co-Ordinator's Group (HASCOG) on 25th April 2024, it was agreed the consultation period was to be extended until 10<sup>th</sup> May 2024 due to the local election. HASCOG approved this document on the understanding it did not fundamentally change after consultation which it did not.

4.3 The policy was consulted on with the unions. No comments have been received.

4.4 This policy was approved by Management Team on 25<sup>th</sup> June 2024.

#### 5 Conclusion

5.1 To approve the RPE Policy.

5.2 Once approved the documents will be circulated to all employees and made available on the DASH and Delta systems.

5.3 Corporate Health & Safety will support teams to meet the requirements laid out in this policy.

#### 6 Appendices Appendix A – RPE Policy

#### 7 Background Papers none

Alastair Blunkett

Assistant Director – Environment and Enforcement

# Respiratory Protective Equipment Policy

## Quality Record

Issue No.	Date	Initial EIA	Stage	Agreed
1	25/4/2024		HASCOG	25 April 2024
			Management Team	25 June 2024
			ICMD	



<b>Contents</b>	<b>Page</b>
<b>1. Aim of the Policy</b>	<b>4</b>
<b>2. Legislation</b>	<b>4</b>
<b>3. Respiratory Hazard</b>	<b>4</b>
<b>4. Managing Risks Using RPE</b>	<b>5</b>
<b>5. RPE Assessment Process</b>	<b>5-6</b>
<b>6. Types of RPE</b>	<b>6-7</b>
<b>7. Face Fit Testing Requirement</b>	<b>7-8</b>
<b>8. Face Fit Costs and RPE Specific Responsibilities</b>	<b>8</b>
<b>9. Conditions of RPE Use</b>	<b>8</b>
<b>10. RPE Information, Instruction and Training</b>	<b>8-9</b>
<b>11. Health Surveillance/Occupational Health</b>	<b>8</b>
<b>12. Responsibilities</b>	<b>9</b>
<b>13. Policy Monitoring</b>	<b>10</b>
<b>14. References</b>	<b>10</b>

## **1. Aim of the Policy**

- 1.1 The health and wellbeing of employees is a priority for Nuneaton & Bedworth Borough Council (NBBC). This Respiratory Protective Equipment (RPE) policy sets out the corporate approach to RPE use, including information on the various types of RPE available and to ensure the appropriate RPE is distributed and utilised correctly in a consistent manner across the Council.
- 1.2 Adherence to this policy is mandatory for all Council employees and other workers working on behalf of NBBC. This policy sets out the requirements and expectations of the Council in relation to RPE that is worn and used for work purposes.
- 1.3 It is for each service department to decide through their operational working practices and risk assessments which type of RPE is best suited to the particular airborne hazard being produced. If the risk assessment identifies RPE should be worn then this should be complied with and enforced regardless of the duration of the task. All employees have a duty to report any dangers, dangerous acts or omissions.
- 1.4 Due to changes from HSE regarding a clean shaven policy no longer being enforceable this policy will outline NBBC's approach to ensuring appropriate RPE is provided.
- 1.5 This policy should be read in conjunction with the Personal Protective Equipment (PPE) Policy.

## **2. Legislation**

- 2.1 This Policy has been designed to ensure the Council complies with the following legislation:
  - Health & Safety at Work Act 1974
  - Management of Health & safety at Work Regulations 1999
  - Control of Substances Hazardous to Health Regulations 2002 (COSHH),
  - Control of Asbestos Regulations 2012
  - Personal Protective Equipment Regulations 2022and other relevant legislation and ensures compliance with NBBC's Health & Safety Policy.

## **3. Respiratory Hazard**

- 3.1 Airborne substances hazardous to health can be in dust, mist, vapour or gas form, e.g. wood dust, welding fumes, solvent vapours, silica and asbestos fibres which may not be visible.
- 3.2 Depending on the substance the effects can be immediate or long term. Common short term (acute) health effects may include:

- Headaches
- Drowsiness
- Dizziness
- Nausea
- Eye and/or skin irritation

Long term (chronic) effects may include:

- Death
- Cancers
- Organ damage
- Sleep disorders
- Memory loss

#### **4. Managing risks using RPE**

- 4.1 When managing risks arising from respiratory hazards, managers should apply the most appropriate and effective control measures that are reasonably practicable.
- 4.2 Preference should be given to control measures that protect multiple people at once, such as Local Exhaust Ventilation (LEV). Personal Protective Equipment (PPE) and RPE should not be the first and only control measure considered in line with the hierarchy of controls (Elimination, Substitution, Engineering Controls, Administrative controls, PPE).
- 4.3 Emergency procedures must be carefully considered by the management in the risk assessment process. Managers must have procedures in place that cover all serious and imminent danger for work activities.
- 4.4 Employees must be aware of the emergency procedures through clear instruction, information and training.

#### **5. RPE Assessment Process**

- 5.1 The requirement to provide RPE is identified through COSHH Assessments or Task Risk Assessments. All COSHH assessments and risk assessments must be completed and recorded using the relevant corporate templates on N-share and communicated to employees.
- 5.2 Line managers/supervisors when considering RPE in consultation with the workforce should ensure all management responsibilities are met. RPE must adhere to the required EN/CE standard. When selecting RPE managers should apply the most appropriate and effective that are reasonably practicable in relation to the risk. Manufacturer's instructions must always be followed.
- 5.3 These two factors are crucial for assessing and selecting RPE.

**Adequate** – It is correct for the hazard and reduces exposure to the level required to protect the wearers health.

**Suitable** – It is correct for the wearer, task and environment, such that the wearer can work freely and without any additional risks due to the RPE.

- 5.4 There is useful RPE guidance HSG53 from the HSE to help with selecting the correct RPE to the hazard. [Respiratory protective equipment at work: A practical guide HSG53 \(hse.gov.uk\)](https://www.hse.gov.uk/publications/hsg53/)
- 5.5 The performance of the mask relies heavily on the quality of fit to the wearers face. An ill-fitting mask will greatly reduce the protection provided to the wearer. RPE is available in different sizes to allow for the facial differences of workers. Face fitting will ensure that the equipment selected is suitable for each wearer.
- 5.6 The use of tight-fitting respirators requires employees to be appropriately clean shaven and have no pre-existing medical conditions which may be exacerbated by use of the mask. Facial hair must NOT exceed eight hours growth before starting the task where RPE should be worn.
- 5.7 In general, RPE should not be shared. However, some consumables for RPE which are not contaminated by a wearer such as a blower unit for a powered respirator can be shared.
- 5.8 For the purpose of clarity this applies to all directorates, for any Cat B work involving Asbestos Containing Materials (ACMs) it is recommended that **only** disposable tight fitting FFP3 masks be used so they can be disposed of with the contaminated waste and do not require decontamination and cleaning between uses.
- 5.9 Be aware of wear time limitations of RPE when choosing suitable equipment.

## 6. Types of RPE

### Tight Fitting RPE

- 6.1 A tight fitting face piece is either a full face or half face filtering face mask these can either be reusable or disposable. NBBC as a rule will provide employees with disposable half face masks.



- 6.2 Tight fitting masks require face fit testing by a qualified tester. The use of disposable masks can be more cost effective in certain work circumstances as there are no parts or maintenance costs, however a disposable mask must not be used more than once. Please refer to the manufacturer's instructions regarding recommended wear times.

#### Powered Respirator (Air fed hoods)

- 6.3 Powered respirators work by using positive pressure to force any contaminants away from the wearers breathable air. NBBC will consider supplying where a need is shown after review with the manager powered respirators as an alternative to tight fitting masks unless it is Cat B work. Powered respirators do not require face fit testing as they do not have a close fitted seal on the wearers face. They must be used in accordance with the manufacturer's instructions.



## 7. Face Fit Testing Requirements

- 7.1 Certain H&S legislation, guidance and hazardous substance manufacturer's safety data sheets makes specific reference to RPE use and stipulate that tight fitting RPE be used. Please refer to the references section at the end of this document for further reading on Control of Substances Hazardous to Health Regulations (COSHH), Control of Asbestos Regulations and Control of Lead at Work Regulations.
- 7.2 When a COSHH or Risk Assessment control measure identifies the need to wear tight fitting RPE this will require a face fit test for all the masks that they use. Face fit testing ensures an adequate seal or fit to the wearer. It will also ensure the mask is providing the protection it is designed for.
- 7.3 Face fit testing can only be carried out by a qualified, competent person who has undertaken face fit testing training. Employees currently trained to conduct face fit testing is available on DASH.
- 7.4 Poorly fitted face masks can create inward leakage of airborne contaminants. A good seal **MUST** be achieved every time RPE needs to be worn, not just when an employee presents themselves for face fit testing. This will be monitored during site inspections.
- 7.5 Regular checks on equipment by employees is crucial to spot damage or potential leakage issues.

## Repeat Test Conditions

- 7.6 Repeat face fit tests will be required when the wearer:
- Loses or gains weight
  - Undergoes any substantial dental work
  - Develops any facial changes (scars, moles etc) around the face seal area
  - Every 12 months in line with Council policy
  - Changes to mask supplier
- 7.7 Where an employee's job role requires them to wear tight fitting RPE including Cat B officers they must be appropriately clean shaven whenever they need to wear RPE. This applies to all areas of the face that are required to achieve an adequate seal with the mask.
- 7.8 Any records of face fit testing must be uploaded into the individuals personnel file in Content Manager by the line manager and kept within the department for reference purposes.

## **8. Face Fit Testing Costs and RPE Specific Responsibilities**

- 8.1 NBBC will cover all costs of face fit testing and the cost of RPE. Managers are responsible for making the necessary arrangements to ensure testing is completed. Line managers/Supervisors must monitor and act on any obvious changes and declared issues reported by an employee. A fit test must be arranged at the earliest opportunity, and it may be necessary to assign temporary alternative duties to that employee until a replacement mask is provided.
- 8.2 Employees have a legal duty to comply with their employer and attend face fit testing (ref. section 7 Health & Safety at Work Act 1974) and thereafter wear the RPE as instructed and maintain the equipment. Employees must report any additional hazards or dangers that arise because of control measures (ref. Reg 14 Management of Health & Safety at Work Regs 1999).
- 8.3 All employees must report changes in facial features that can affect the seal of their mask as soon as they realise there is an issue with the fit. RPE must not be misused or adapted to fit.

## **9. Conditions of RPE Use**

- 9.1 NBBC will provide either tight fitting face masks or a powered respirator to all employees.
- 9.2 Should an employee identify themselves as clean shaven and have a tight-fitting mask allocated, they must not have more than 8 hours growth when using the mask.

- 9.3 Should an employee decide they wish to grow facial hair they must inform their line manager/supervisor so a powered respirator can be made available to them.
- 9.4 As a clean-shaven policy can no longer be enforced, Line Managers must ensure powered respirators are made available for any employee with facial hair identified as requiring RPE.
- 9.5 Should an employee be using a powered respirator they must comply with all cleaning, storage and maintenance instructions from the manufacturer and change the FFP3 filters when prompted.

## **10. RPE Information, Instruction and Training**

- 10.1 RPE information, instruction and training shall be provided to employees and other workers to allow them to carry out their duties as detailed within this policy and the workplace risk assessment to:
- Make full and proper use of any RPE provided.
  - Maintain, clean and store RPE effectively.
  - Identify defects with RPE.
  - Promptly report defective items of RPE for replacement or repair.

## **11. Health Surveillance/Occupational Health**

- 11.1 Occupational Health will be engaged to assist with identifying all roles which will require health surveillance for Spirometry (lung function testing) for the purpose of RPE usage.
- 11.2 Employees and other workers where they are identified to be under health surveillance must attend all appointments arranged on their behalf and co-operate with the Council's Occupational Health provider.
- 11.3 All Occupational Health records will be held on the employees personnel file in Trim. Employees will receive copies of these records. Employees can give their consent for these records to be released to others if they wish.

## **12. Responsibilities**

### **Assistant Directors, Line Managers and Supervisors.**

- 12.1 Although the Chief Executive holds ultimate responsibility for all Health & Safety matters within NBBC, Assistant Directors, Line Managers and Supervisors are responsible for ensuring this policy is adhered to at all times within their service area and amongst the teams they manage. This includes raising awareness of RPE requirements during employee induction.
- 12.2 Assistant Directors, Line Managers and Supervisors will ensure a sensible consistent approach is maintained regarding the selection and distribution of

RPE to their teams. Each type of RPE needs to be assessed as being adequate and suitable for the work activity it is intended for.

12.3 In liaison with the Corporate Health & Safety Team, Assistant Directors, Line Managers and Supervisors will ensure that:

- They apply the hierarchy of risk control before considering RPE.
- That employees are involved in the selection of RPE.
- Where more than one item of PPE is worn and used simultaneously, that the items are compatible and perform and protect as intended.
- All RPE issued to employees is logged and recorded.
- Employees are trained in the correct use of RPE, the hazards and risks it protects against, how to ensure the RPE remains in good repair, how to report defective RPE and obtain replacements.
- That adequate storage facilities are provided for the RPE.
- RPE is adequately maintained so it remains in good working order at all times, this includes cleaning of the RPE.
- Any worn, damaged or defective RPE is returned and replaced with all issues/defects updated in the relevant logs/records.
- Managers must consider wear time for any RPE used in the workplace. All RPE will have a recommended wear time in the manufacturer's instructions.
- Where any Line Managers fail to risk assess RPE, they will be in breach of this policy.
- RPE must be included in site inspection visits and quarterly checks.

### **Employees and other Workers**

12.4 **Employees** are all employees under an employment contract with NBBC. **Other workers** include Agency workers, Volunteers, Councillors and Contractors as identified within a risk assessment, and must:

- Always adhere to the standards and guidance within this policy whilst working on Council business.
- Wear the RPE in accordance with the information, instruction and training given.
- Be responsible for taking reasonable care of RPE issued to them and for the correct inspection, use, cleaning, and storage.
- Report any defects, damage or loss of equipment to line manager or supervisor in accordance with any information, instruction or training given, failure to do so may result in disciplinary action or contract termination.
- Excessive loss of equipment will instigate an investigation and may result in disciplinary action or contract termination.
- Should an employee leave the authority for any reason the RPE equipment must be returned.



## **Contractors**

- 12.5 Contractors undertaking work on behalf of NBBC are responsible for providing the correct RPE for their employees. It is the Contractors responsibility that suitable training is provided, that the equipment is used correctly and properly maintained.

## **13. Policy Monitoring**

- 13.1 This policy will be reviewed every three years or when legislation requires. The policy is maintained by the Corporate Health & Safety Team.

## **14. References**

- Health & Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- Personal Protective Equipment at Work Regulations 2002 (amended 2022)
- Control of Substances Hazardous to Health Regulations 2002
- Control of Asbestos Regulations 2012
- Control of Lead at Work Regulations 2002
- HSE.gov.uk