

Asbestos Management Procedure

Enabling Policy Statement; Executive Owner; Approval Route:	Our Safety - Chief Operating Officer - Compliance Committee
Is the Procedure for internal use only (Non- disclosable)?	Disclosable
Associated Policy Statements:	N/A
Authorised Owner:	Director of Health and Safety
Authorised Co-ordinator:	Health and Safety Manager (Professional Services)
Effective date:	01 October 2025
Due date for full review:	01 October 2028
Sub documentation:	- Asbestos Management Plan - Faculty and Department Designated Persons (Appendix 1) - RIDDOR reportable incidents in relation to asbestos (Appendix 2)

Approval History

Version	Reason for review	Approval Route	Date
1.0	Reviewed and updated (including in accordance with new Policy Framework 2022). Replaces Asbestos Management Policy (Version 3.0, dated 6 July 2020).	Compliance (Health, Safety and Wellbeing) Committee.	13 Oct 2022
2.0	3 year cyclical review	Compliance (Health, Safety and Wellbeing) Committee	01 Oct 2025

1. Purpose

This Procedure outlines the arrangements adopted by the University to prevent staff, contractors, students, and visitors being exposed to asbestos in a manner that could adversely affect their health. The arrangements are based on the requirements contained in the Control of Asbestos Regulations 2012 and accompanying Approved Code of Practice, Managing and Working with Asbestos (L143), together with other legislative and best practice performance standards.

The aim of this Procedure is, therefore, to provide an asbestos management framework which provides a safe environment for our students, employees, contractors, and visitors by conducting our business in a way that protects the health, safety, and welfare of each individual.

2. Scope and Exceptions to the Procedure

This Procedure covers work of any kind involving the removal, handling, and disposal of any material containing asbestos. Its requirements apply to all staff, students, contractors, visitors, and others.

This Procedure applies to University subsidiaries only with regard to the responsibilities of members of staff and students.

This Procedure does not apply to Surrey Research Park (SRP) buildings, as SRP have their own procedures/processes for the management of asbestos.

3. Definitions and Terminology

Asbestos Containing Materials (ACMs) – Asbestos is a natural mineral fibre and Asbestos Containing Materials (ACMs) were used extensively in buildings prior to the year 2000, because of their good mechanical strength, their thermal and sound insulating properties, as well as their insulation and fire-resistant properties. Asbestos can be found in a number of products including, *inter alia*, pipe lagging, wall insulation, ceiling tiles, sprayed onto steelwork, external roofing material, guttering and downpipes, floor tiles, lining in fire doors, fume cupboards, ovens and gaskets, and as textured ceiling coatings.

Some of the University's premises were built when asbestos was a common construction material, and it is likely to remain in our buildings for many years to come. However, this does not mean that it poses a risk to staff, students, and others. If left intact and undisturbed, asbestos presents no direct risk. It is the disturbance of the material leading to release of fibres into the environment which could be detrimental to health.

Duty Holder – The Head of Maintenance Services is the Duty Holder as defined by the 'Control of Asbestos Regulations 2012'. The Duty Holder has delegated the management of Asbestos as outlined in the Asbestos Management Plan to a competent person.

Additionally, *Designated Persons* have also been appointed within each department and faculty to assist the Duty Holder (see [Appendix 1](#)).

Competent person – a person who has the skills, knowledge, attitude, training and experience to undertake the role effectively.

Training and briefing – Training involves equipping staff, students (and others where the University has a duty of care) with relevant skills to deal appropriately with a given health and safety situation.

Briefing is informing such persons of relevant knowledge in relation to health and safety.

4. Procedural Principles

4.1. Commitment

Compliance with the requirements of this Procedure will ensure:

- The University meets its statutory obligations in respect of the Control of Asbestos Regulations.
- The health protection of staff and students, whilst working in University buildings having asbestos containing materials.
- The health protection of others (including contractors, visitors, members of the public).
- The safe and effective management of all asbestos containing materials.
- Everyone is aware of their roles and responsibilities.
- Affected staff (and others, including contractors) who are liable to disturb asbestos during their normal work activities are appropriately informed, instructed, and where necessary trained and supervised.

4.2. Arrangements

In order to meet the above objectives, the University will:

- Clearly define the organisational arrangements for achieving compliance (see roles and responsibilities section of this Procedure).
- Ensure resources are made available to achieve compliance and will operate on the principle that where asbestos is identified as presenting a risk because of its unstable condition or where there is a distinct likelihood it will be disturbed, it will be removed, sealed, or encapsulated or such other method as appropriate.
- Take reasonable steps to find out if there are materials containing asbestos within its premises, and if so, its amount, location, and condition.
- Presume materials contain asbestos unless there is strong evidence that they do not.
- Make, and keep up to date, a record of the location and condition of the asbestos materials or materials which are presumed to contain asbestos.
- Assess the risk of anyone being exposed to fibres from the materials identified.
- Prepare and implement an Asbestos Management Plan that sets out in detail how the risks from asbestos will be managed.
- Periodically review and monitor the effectiveness of Asbestos Management Plan and the arrangements to act on it, so that the plan remains relevant and up to date.
- Provide information on the location and condition of the materials to anyone who is liable to work on or disturb them and promote an awareness within the wider University community of the hazards presented by asbestos.
- Establish contingency arrangements to deal with any inadvertent release of asbestos fibres into the environment.
- Appoint a competent person (and nominated deputy) to ensure the requirements of this Procedure and other relevant asbestos-related performance standards are met.
- Review asbestos management arrangements periodically or whenever there are changes in relevant legislation, guidance, or University activities.

4.3. Asbestos Management Plan

The University has an Asbestos Management Plan which sets out how the risks from asbestos will be managed. The purpose of the Asbestos Management Plan is to:

- Demonstrate the University of Surrey's commitment to complying with the Control of Asbestos Regulations 2012.
- Clearly identify the responsibilities of the duty holder.
- Detail the mechanism by which the University will prevent the exposure of staff, students and others to asbestos and prevent the release of asbestos fibres.

The plan is the responsibility of the Head of Maintenance Services. It will be reviewed annually by

the Competent Person and Asbestos Management Group.

4.4. Asbestos Information, Instruction and Training

The University will ensure that anyone who is liable to disturb asbestos during their normal work, or who supervises those personnel, gets the correct level of information, instruction, and training so that they can work safely and competently without risk to themselves or others.

Different levels of training will be needed for different building users, and this is detailed in the Asbestos Management Plan.

4.5. Labelling

Standard red/black asbestos warning labels will be applied to ACMs considered to be a significant risk, where labelling is deemed necessary to prevent accidental damage and not cause undue concern. In areas where it is recognised that such labels may cause anxiety to the building occupants, ACMs will be labelled with yellow 'DO NOT DRILL or DISTURB', to reduce the chance of inadvertent damage and exposure.

The Asbestos Register must still be consulted on every occasion when intrusive work is proposed.

4.6. Roles and Responsibilities

All responsibilities can be delegated, unless otherwise stated, but it remains the responsibility of the named individual to ensure they are completed in accordance with this Procedure and the Asbestos Management Plan.

The information below should be read in conjunction with the Asbestos Management Plan.

4.6.1. Head of Maintenance Services as the 'Duty Holder' has overall responsibility for implementing the requirements of this Procedure, including:

- Implementing a management system which ensures that maintenance/building work is organised such that maintenance staff and contractors do not unknowingly work on asbestos, and whenever they knowingly work directly with or near such material, it is adequately controlled.
- Appointing a Competent Person (and nominated Deputy) to assist them with the execution of their responsibilities and agreeing the arrangements for their involvement in any works, along with such other measures necessary for the execution of this role holder's duties.
- Formally identifying the roles and responsibilities of their staff in respect of the day-to-day management of maintenance/building work.
- Applying for such resources as are appropriate to discharge the University's statutory obligations and the requirements of this Procedure.
- Periodically reviewing, with the Competent Person (and other relevant staff), the effectiveness of the above management system.

4.6.2. The Competent Person will:

- Co-ordinate the implementation and ongoing effectiveness of the Asbestos Management Plan (supported by appropriate EF/CS staff).
- Provide relevant information to Designated Persons based upon the Asbestos Register.
- Ensure that any remedial or asbestos works are overseen in liaison with Designated Persons, and that all works are carried out in accordance with the regulatory requirements and codes of practice for asbestos work.
- Oversee all asbestos-related permit to work tasks that are conducted on university owned and managed buildings.

- Maintain the asbestos records in a controlled location and liaise with the CAFM EFCS Business Support Manager regarding any necessary amendments to the asbestos record.
- Inform the CAFM EFCS Business Support Manager of any updates to asbestos information required where works have been undertaken.

Note: The Deputy Competent Person will be responsible for the above duties in the post holder's absence.

- 4.6.3. Designated Person(s) – to assist the 'Duty Holder' in fulfilling their obligations under the Control of Asbestos Regulations 2012, where applicable Departments/Faculties will nominate a Designated Person or Persons.

The extent of the responsibility of the Designated Person will depend on the extent of their involvement in relation to intrusive works into the fabric of the building.

The extent of co-operation is as follows:

- To prevent accidental disturbance or contact with any ACM.
- To supply suitable and sufficient information in relation to asbestos to any person carrying out intrusive works into the fabric of the building.
- To keep the duty holder updated on any works carried out to an ACM; this may be repair, removal, or damage to the ACM.
- To co-ordinate with the Competent Person the asbestos management surveys and re-inspections, ensuring the asbestos register is kept up to date.
- To co-ordinate with the Competent Person any further survey works where activities will be affected by the presence of ACM.
- To ensure that any remedial or asbestos works undertaken in buildings are overseen in liaison with the Competent Person that all works are carried out in accordance with the regulatory requirements and codes of practice for asbestos work.

- 4.6.4. Head of Built Environment Projects (Planning and Development) is responsible for:

- Ensuring that the requirements of this Procedure are implemented and for drawing to the attention of the Duty Holder and Competent Person any matters which may inhibit the execution of this Procedure, and which lie outside the post holder's remit to resolve.
- The application of, and allocation of, resources towards the effective management of asbestos issues.
- Obtaining advice from the Competent Person on the inclusion/suspension/removal of asbestos contractors and acting upon such advice.
- Ensuring the Competent Person arranges suitable initial and refresher training in respect of their staff.

- 4.6.5. CAFM Manager is responsible for:

- Receiving certified asbestos data from the University's Competent Person and/or Designated Persons, uploading the data into the asbestos register held in the University's CAFM system and ensuring this is accessible to relevant persons within the University.

- 4.6.6. Director of Health and Safety is responsible for:

- The provision of advice and guidance on the application of legislative requirements.
- Where necessary, liaising with the enforcement authorities.
- Reporting incidents under RIDDOR (see [Appendix 2](#)).
- Ensuring that asbestos-related incidents are appropriately investigated, and records are kept for a minimum of 40 years.

- 4.6.7. Contractors that may disturb asbestos as part of their day-to-day activities must:

- Work in accordance with the findings of any risk assessment, permit to work system, and the requirements of any information, instruction, and training (including induction) provided.
- Ensure that their workforce (including that of any sub-contractor working on their behalf) have the appropriate level of asbestos training for the work/activities being undertaken.
- Immediately report to the Competent Person (either directly or via the Designated Person) any incident involving asbestos, including any suspected inadvertent release of asbestos fibres.
- Immediately stop work if suspected asbestos containing material is discovered and immediately seek the advice of the Competent Person (either directly or via the Designated Person).
- Have attended the contractor's 'Green Book' induction training within the last 12 months before starting work on site.

4.6.8. Occupational Health Service will be responsible for:

- Providing occupational health advice to management and staff on issues relating to asbestos.
- Ensuring that following referral, any exposure is recorded on the employee's medical notes and retained for a period of 40 years after the date of final exposure.

Note: The procedure for potential exposure to asbestos and referral to occupational health is detailed in the Asbestos Management Plan.

4.6.9. Members of staff and students – we ask all staff and students to play a part in ensuring that people are not exposed to asbestos by:

- Reporting any damage to buildings to the Estates & Facilities (E&F) Help Desk, irrespective of whether it is labelled as containing asbestos.
- Not, under any circumstances, carrying out repairs or alterations. All maintenance and building work must go through Estates and Facilities.

4.6.10. Asbestos Management Group – the purpose of this Group is to contribute to the development and direction of asbestos management at the University. The Group will monitor asbestos management performance and provide a forum for obtaining input from relevant departments on matters relating to asbestos management.

The Group will meet quarterly and report to the University Compliance (Health, Safety and Wellbeing) Committee and Health and Safety Consultative Committee via the EF/CS H&S Management Group.

5. Governance Requirements

5.1. Implementation: Communication Plan

The Procedure will be available via the University procedures webpages.

Relevant Health and Safety Committees and EF/CS Committees will be notified, and information disseminated through line management. Faculty Health and Safety Committee will also be informed, as required.

This Procedure and Asbestos Management Plan are communicated through Instructions and Guidance for Contractors ('Green Book'). Furthermore, copies of this Procedure and the Asbestos Management Plan are provided to contractors and other relevant third parties.

This Procedure and relevant supporting documentation are also published on the University

Health and Safety intranet site.

5.2. Implementation: Training Plan

Communicated through specific, relevant training – including inductions, asbestos awareness training, duty holder training, and contractors 'Green Book' training (repeated every 12 months).

The University's Asbestos Management Plan contains a training needs assessment, plan and competency standards.

Training and briefing will be made available in a range of formats according to the needs of the trainee and different groups of staff, students, and others.

5.3. Review

The Duty Holder, Competent Person, and Director of Health and Safety will monitor for required changes and updates. Minor changes will be reviewed by the Asbestos Management Group and approved by the Compliance (Health, Safety and Wellbeing) Committee. Major reviews will also be reviewed by the Asbestos Management Group, prior to submission to Compliance (Health, Safety and Wellbeing) Committee for approval, and if required, noted at Executive Board.

This Procedure will be reviewed every three years or in line with relevant changes in legislation, if sooner. The Health and Safety Consultative Committee will be consulted during the review process, as required.

5.4. Legislative Context and Higher Education Sector Guidance or Requirements

5.4.1. Applicable Legislation

This Procedure complies with the requirements of the Health and Safety at Work Act 1974, the Control of Asbestos Regulations 2012, and Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

5.4.2. Legislative context

This Procedure sets out to comply with the required 'duty of care' placed upon the University. Under Health and Safety Law a 'duty of care' is generated between organisations and individuals when carrying out activities that could foreseeably cause harm.

The primary duty of care is owed through the employer-employee relationship in which the employer owes a duty of care to ensure that work activities that could result in harm to the employee are assessed and controlled. That duty of care is put into practice by the line management responsibilities as set out in the hierarchy of the organisation.

This duty of care cannot be delegated away; instead, the act of delegation must be accompanied by a realistic and workable system of monitoring or supervision to ensure that the delegated task has been adequately implemented (i.e., the responsibility is not met by giving directions; it is met when those directions have been confirmed as carried out). The result is a cascade of delegated accountability that runs through the organisation via the line management network, accompanied by a system of monitoring, supervision, and feedback.

The duty of care extends to assurance that services provided by others (be they another department of the University or contractors) are undertaken safely. The level of assurance required should be commensurate with the risk of the activity. In addition, anyone carrying out an activity owes a duty of care to anyone who may be put at risk by the activity, such as students, staff, and visitors.

5.5. Sustainability

This Procedure addresses SDG goal 3 – Good Health and Well-Being, by setting out standards and procedures for managing asbestos protecting the health and well-being of staff, students, visitors and contractors as well as the wider public that may come into contact with University-related asbestos. Furthermore, to ensure both legal compliance and protection of the environment, arrangements for the disposal of asbestos containing materials is outlined in the University's Asbestos Management Plan.

6. Stakeholder Engagement and Equality Impact Assessment

6.1. An Equality Impact Assessment was completed on **28/08/2025** and is held by the Authorised Co-ordinator.

6.2. Procedure communicated to all subsidiaries on **06/10/2025**.

6.3. Stakeholder Consultation was completed, as follows:

Stakeholder	Nature of Engagement	Request EB Approval Yes/No	Date	Name of Contact
Governance	3-year cyclical review of existing Procedure.	N	25 August 2025	Kelley Padley, Governance Officer
Members of the Asbestos Management Group	3-year cyclical review of existing Procedure.	N	28 August 2025	Members of this Committee.
Members of the Compliance Management Group	3-year cyclical review of existing Procedure.	N	28 August 2025	Members of this Committee.
Members of the EF/CS H&S Management Group	3-year cyclical review of existing Procedure.	N	28 August 2025	Members of this Committee.
Health and Safety Consultative Committee	3-year cyclical review of existing Procedure.	N	28 August 2025	Members of this Committee.
Equality, Diversity & Inclusion	3-year cyclical review of existing Procedure.	N	28 August 2025	Jo McCarthy-Holland, Head of Equality, Diversity and Inclusion.
Sustainability	3-year cyclical review of existing Procedure	N	28 August 2025	Martin Wiles, Head of Sustainability
Academic Freedom of Speech	3-year cyclical review of existing Procedure	N	28 August 2025	Professor Josh Andresen (Law)