

**PRINCIPLES AND  
GUIDELINES  
FOR THE  
MANAGEMENT OF ASBESTOS  
IN VICTORIAN  
PUBLIC HEALTH AGENCIES**

(These Guidelines apply to all H&CS funded public hospitals,  
Community Health Centres and Ambulance Services Victoria)

**MARCH 1993**

**HEALTH & COMMUNITY SERVICES**

## **1. PREAMBLE**

- 1.1 These Guidelines have been developed and endorsed by the Health Industry OHS/WorkCover Advisory Committee to aid employers, employees and unions in the management of asbestos (including any material which contains asbestos) in Victorian public health agencies.
- 1.2 These Guidelines do not displace regulatory requirements detailed in the OHS Act (1985) and the OHS (Asbestos) Regulations (1992) and other relevant Acts, Regulations or Codes of Practice, but are designed to be complementary to them.

## **2. INTRODUCTION**

### **2.1 Asbestos General**

- (a) Asbestos is defined as the fibrous form of mineral silicates belonging to the serpentine and amphibole groups of minerals. The types of asbestos which may be found in health agencies include chrysolite, amosite and crocidolite (white, brown/grey and blue asbestos respectively).
- (b) Exposure to airborne asbestos dust occurs as a result of dust forming operation such as: handling, sawing, sanding, grinding, drilling, turning or general maintenance, renovations or similar operations upon material containing asbestos.
- (c) Asbestos which has been incorporated into a stable matrix can be found in many working environments. Provided the matrix remains stable and no airborne dust is produced, it presents no health risk. As asbestos deteriorates over time the risk of fibres becoming airborne increases.

### **2.2 Summary of Health Effects**

- (a) Significant health risks can arise from the inhalation of airborne asbestos fibres and their passage into the lungs. Small fibrous particles may become airborne and be inhaled. Fibres less than 3 micrometers in diameter are labelled respirable - they are not intercepted by the lung's defences and can penetrate into the deepest regions of the air passages. Asbestos fibres are found in the lungs of the majority of individuals.

- (b) The inhalation of high concentrations of asbestos fibres may result in asbestosis, a progressive scarring of lung tissue. The effects of asbestosis are to cut down the speed of diffusion of oxygen from the lungs to the blood and to increase the effort required to inflate the lungs in breathing, resulting in the symptom of shortness of breath. Persons with asbestosis have a higher risk of contracting lung cancer. At present it is not possible to assess whether there is a level of exposure in humans below which an increased risk of cancer would not occur.
- (c) The two main forms of cancer associated with the inhalation of asbestos fibres are lung cancer and mesothelioma. Generally, asbestos fibres less than 3 micrometers in diameter and more than 8 micrometers in length are potentially carcinogenic (cancer causing). The risk of cancer is greater with increasing exposure to airborne asbestos fibres.
- (d) Concerns also exist regarding exposure via ingestion. Cancer in the gastro-intestinal tract and other sites of the body have been noted in workers exposed to asbestos. The question of whether links exist between such cancers and asbestos exposure is the subject of continuing debate in the scientific community.
- (e) There is a long period of delay which may range from ten to more than fifty years between first exposure and the development of mesothelioma and lung disease.
- (f) All forms of asbestos have been found to cause lung cancer. Cigarette smoking greatly increases the risk of lung cancer in people heavily exposed to asbestos.

### **3. OBJECTIVES**

The hazard from asbestos will be most effectively reduced by a planned and co-ordinated approach involving consultative and managerial strategies. These Guidelines are aimed at ensuring:

- 3.1 A safe working environment so that, as far as is practicable, there is no health risk arising from asbestos;

- 3.2 Proper agency management of the progressive identification, assessment and eventual complete removal of asbestos, and the substitution wherever practicable of other materials for asbestos products;
- 3.3 That appropriate consultation processes between management, employees and, when requested, employee representatives are established; and
- 3.4 That Victorian public health facilities are ultimately free of asbestos.

#### 4. PRINCIPLES

- 4.1 Health agency management, as the direct representatives of the employer, carry the primary responsibility for maintaining safe working systems and a safe working environment.
- 4.2 An asbestos management strategy will be developed as an integral part of a health agency's overall approach to risk management.
- 4.3 All aspects of asbestos management will be carried out in consultation with staff as well as the relevant health and safety representatives and, when requested, employee representatives.
- 4.4 As far as is practicable, agency management must determine whether asbestos is present in the workplace. This process was required to commence before 1st October 1992.
- 4.5 Where asbestos is present, agency management must assess the risk of exposure of employees.
- 4.6 Where assessment indicates there is risk to health from exposure to asbestos, agency management (while providing immediate protection to employees) will develop a written Asbestos Management Plan to control the risk.
- 4.7 Where asbestos is found or suspected, employees, relevant health and safety representatives and employee representatives must be informed.
- 4.8 Where contact with asbestos may occur, full information of the occupational health and safety consequences of inhalation of asbestos, and appropriate control strategies, will be provided to all affected employees and/or contractors.

- 4.9 Removal of asbestos is to be considered through an established consultation process, subject to priority setting being determined by the condition and location of the asbestos.
- 4.10 All works (whether minor or major) associated with renovations, extensions, new additions or maintenance to buildings will provide for any necessary removal of asbestos within the specification or arrangements for those works. Removal should be completed prior to the commencement of any works.
- 4.11 Asbestos removal may not be immediately necessary, but must be completed before a structure or part of a structure is demolished.
- 4.12 Substitutes for asbestos products should be thoroughly evaluated before use, and the least hazardous substance which is suitable for the specifications of the task should be chosen.
- 4.13 H&CS as the body responsible for funding public health agencies, carries primary responsibility for providing resources for capital works and services projects, and other major contingency needs including the removal of asbestos.

## **5. PROCEDURES**

The Health Industry OHS/WorkCover Advisory Committee believes that adoption of the attached procedures is an appropriate means of achieving the above principles and objectives.

**MANAGEMENT OF ASBESTOS**

**RECOMMENDED PROCEDURES FOR PUBLIC HEALTH AGENCIES**

Implementation of the following procedures should ensure that asbestos and materials containing (or suspected of containing) asbestos are managed in a safe and timely manner. Application of these procedures will ensure that the health and safety of employees, contractors, patients and visitors are not placed at unnecessary risk through exposure to asbestos.

Their application will also ensure a continuing safe working environment during any procedure relating to asbestos containing materials, and will allow for the maintenance of the normal industrial relations and work relationships.

**1. WORKPLACE CONSULTATION PROCESSES**

- 1.1 The agency management shall ensure that a consultative process is established, through which the relevant health and safety representative and, when requested, employee representatives will be advised of, and involved in, asbestos inspection and identification, risk management, and control measures, including development of an agency specific:
  - Asbestos Audit Program
  - Asbestos Management Plan
  - Arrangements to implement the Asbestos Emergency Procedures
- 1.2 Where the presence of asbestos has been established an Asbestos Working Party reporting to the OHS Committee should undertake these functions, unless other mutually acceptable alternative mechanisms are preferred by management and employee representatives.
- 1.3 The structure of this Working Party is to be agreed between the agency management, health and safety representatives and when requested employee representatives. An example for the composition and working procedures of such a Working Party is attached in Appendix 1.

- 1.4 The responsibilities of the Asbestos Working Party or agreed alternative arrangement will be to:
- a) Monitor the effective implementation of these Guidelines.
  - b) Monitor the development and implementation of the agency asbestos management strategy which includes the Asbestos Management Plan.
  - c) Recommend and review priorities for asbestos removal.
  - d) Receive reports from the agency's Asbestos Co-ordinator, including reports on proposed asbestos works.
  - e) Monitor the development and maintenance of the agency's asbestos register.
  - f) Provide regular reports to the OHS Committee.
  - g) Regularly inform relevant OHS representatives, employees and, when requested, employee representatives of the agency's Asbestos Management Plan, and advise of progress at all appropriate stages of asbestos inspection, identification, and control or removal.
- 1.5
- a) All members of the working party shall have reasonable time during working hours to participate in the activities of the working party.
  - b) Working Party members should have access to training, education and such facilities and assistance as are necessary to enable them to effectively carry out their roles.
- 1.6 A senior employee should be nominated by the agency management to carry out the responsibilities of Asbestos Co-ordinator.
- 1.7 The responsibility of the Asbestos Co-ordinator should include:
- a) Development and maintenance of the agency asbestos management strategy including the Asbestos Management Plan, in consultation with all relevant parties.
  - b) Planning and co-ordinating all stages of asbestos inspection, identification, control and removal works.

- c) Development and maintenance of the agency's asbestos register.
- d) Ensuring all works relating to asbestos are carried out in accordance with appropriate guidelines and regulations.
- e) Implementation of the Asbestos Emergency Procedures.
- f) Reporting on all aspects of asbestos related works to the OHS Committee or Sub-Committee or Asbestos Working Party.
- g) Liaise with and advise on a regular basis all relevant parties in all appropriate stages of asbestos inspection, identification, and control or removal, including employees, OHS representatives, supervisors, departmental managers and, when requested, employee representatives.

## **2. ASBESTOS MANAGEMENT PROCESSES**

It is recommended that:

- 2.1 All stages of risk identification, assessment and control only be performed by technically competent persons who are suitably trained or qualified or accredited to perform these tasks.
- 2.2 All agencies carry out an inspection of each structure owned and/or occupied to determine the presence of asbestos and to develop an asbestos register.
- 2.3 The register contain details of the site, type and condition of any asbestos found (and any other relevant information), and will be provided to the OHS representative and made available for inspection by employees, employee representatives, government representatives and, as appropriate, contractors.
- 2.4 Where asbestos is present, an assessment of the risk of exposure of employees to asbestos fibre will be carried out, taking into consideration:
  - a) The nature, age, layout and condition of asbestos in the workplace.
  - b) Whether the nature of the work performed by the employees is likely to cause the disturbance of asbestos.

- c) Any other factors considered relevant by management, health and safety representatives and as appropriate employee representatives and/or employees.

(To assist in the risk assessment the checklist in Appendix 2 should be used.)

2.5 Where the assessment indicates that there is no risk of exposure, the management will ensure that:

- a) The presence and location of asbestos is clearly identified.
- b) Where practicable, identification will be by labelling.
- c) A periodic inspection (e.g. yearly) of asbestos shall be agreed upon, so any change in the condition of the asbestos will be detected and addressed until final removal.

2.6 Where the assessment indicates that there is a risk, or there is a likelihood of risk, to employees or contractors from exposure to asbestos, appropriate control measures should be implemented. Application of a particular control measure is to be considered through the established consultative process, and subject to the hierarchy of control approach.

- 2.7 a) All asbestos related works must be carried out in accordance with the Occupational Health and Safety (Asbestos) Regulations 1992 and Code of Practice (to be released).
- b) All removal works will be carried out by recognised asbestos removalists, and overseen by recognised approved hygienists.

### 3. ASBESTOS EMERGENCY PROCEDURE

3.1 To ensure a continuing safe working environment and safe working practices, these guidelines are to be immediately followed whenever management, an employee, a health and safety representative, or an employee representative has grounds to suspect that asbestos is present in the working environment in an unsafe or hazardous state.

- 3.2 The immediate working area in which the asbestos, suspected asbestos or the asbestos containing materials is located must be quarantined or the asbestos containing material isolated from normal working activity to prevent its disturbance.
- 3.3 After quarantining the work area or isolating the asbestos, all other work shall continue as normal whilst the procedures specified elsewhere in this document for the identification, evaluation, control and if necessary removal of the asbestos are being carried out.
- 3.4 The OHS representatives and employees maintain all rights/entitlements including those contained in Section 26 of the Occupational Health and Safety Act.

#### **4. GRIEVANCES/DISPUTES RESOLUTION**

- 4.1 Where any grievance/dispute in relation to the implementation and/or operation of these Guidelines is unable to be resolved at the local level, or in discussions with the relevant employee representatives (as appropriate), the agency or the union(s) may refer the matter to the Health Industry OHS/WorkCover Advisory Committee for advice and assistance.
- 4.2 An ad hoc committee consisting of representatives of H&CS, VTHC and VHAVAASA will meet to consider any request for assistance from health agencies or union(s).

## **APPENDIX 1**

### **ASBESTOS WORKING PARTY**

#### **1. COMPOSITION AND WORKING PROCEDURES**

- 1.1 At least half of the members of the Abestos Working Party shall consist of employee representatives.
- 1.2 Employee representatives on the Working Party must be nominated by employees or their locally agreed representatives.
- 1.3 The Chairperson will be selected from, and by, the members of the working party.
- 1.4 A quorum shall consist of half the members of the working party of whom at least half shall be employee representatives.
- 1.5 Meetings shall be held on a regular basis. The times and dates to be determined by the members of the working party.

**APPENDIX 2**

**ASBESTOS RISK ASSESSMENT CHECK SHEET \***

To be completed by the employer, in consultation with the occupational health and safety representative and employees.

Description of Work Location: \_\_\_\_\_

Description of Where Material Located: \_\_\_\_\_

Assessed By:      Employer: \_\_\_\_\_

Position: \_\_\_\_\_

In consultation with occupational health & safety representative:

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Employee(s) Name(s): \_\_\_\_\_

Position(s): \_\_\_\_\_

\* Based on Draft Asbestos Code of Practice

## RISK ASSESSMENT

These Guidelines requires the employer or occupier to identify as far as practicable whether asbestos is present in the workplace. If asbestos has been identified in the workplace, this check list can assist in determining the extent of risk.

### A. Airborne Asbestos

1. Is the asbestos airborne and at, or exceeding, the exposure standard? **Yes/No**

### B. Nature and condition of the asbestos-containing material

2. Asbestos or its surface is friable when it can be pulverised or reduced to powder by hand pressure when dry.

a) Is the material friable? **Yes/No**

b) Is the surface of the material friable? **Yes/No**

3. Is the material poorly bonded to the substrate (i.e. the surface to which it should be attached)? **Yes/No**

4. a) Is there evidence of damage or deterioration in the material? **Yes/No**

b) Is that material liable to further damage or deterioration (e.g. due to age or due to exposure to the weather or water)? **Yes/No**

**C. Location of the asbestos-containing material**

5. Are employees likely to be exposed to the material, either during normal work or during maintenance? **Yes/No**
6. Is the material in an air plenum or in close proximity to a ventilation system? **Yes/No**
7. Does the location of the material make it difficult to conduct regular assessment of that material? **Yes/No**

**D. Layout and condition of workplace**

8. If the material is subject to vibration, is this likely to cause deterioration? **Yes/No**
9. If the material is exposed to weather and water, is this likely to cause deterioration? **Yes/No**
10. Is the storage and handling of goods and other items close to the material likely to lead to damage to the material? **Yes/No**

**E. Nature of work being carried out**

11. Is the work being carried out in the workplace likely to disturb or expose the material? **Yes/No**
12. Are any renovations of the workplace planned which are likely to disturb or expose the material? **Yes/No**

13. Is there regular activity and movement in proximity to the material, either by plant or employees?

Yes/No

**IF THE ANSWER TO ANY OF THE ABOVE QUESTIONS IS "YES", IT IS ESSENTIAL TO OBTAIN COMPETENT ADVICE ABOUT THE DEVELOPMENT OF AN ASBESTOS MANAGEMENT PLAN.**