



Asbestos Management Policy



1. Introduction

- 1.1. The Housing Plus Group (“HPG”) provides quality, affordable homes and care services across Shropshire, Staffordshire and Telford & Wrekin.
- 1.2. HPG is committed to ensuring all properties under its ownership or management are safe and compliant. This Asbestos Management Policy sets out the organisation’s strategic approach to managing asbestos risks, protecting health, and meeting its legal duties as a landlord, care provider and employer.

2. Policy Statement

- 2.1. Housing Plus Group (HPG) acknowledges its statutory responsibilities under the Health and Safety at Work etc. Act 1974 and the Control of Asbestos Regulations 2012 (CAR 2012), including compliance with the associated Approved Code of Practice L143 Managing and Working with Asbestos.
- 2.2. In accordance with Regulation 4 of CAR 2012, HPG is designated as the Duty Holder for the management of asbestos in non-domestic premises and must ensure effective arrangements to prevent exposure.
- 2.3. HPG will:
 - 2.3.1. Undertake suitable and sufficient assessments to identify whether asbestos is present, or likely to be present, in non-domestic premises constructed before 2000.
 - 2.3.2. Maintain an Asbestos Register and Asbestos Management Plan (AMP) to assess, record, and manage risks associated with asbestos-containing materials (ACMs).
 - 2.3.3. Ensure ACMs are appropriately managed through regular monitoring, maintenance, or safe removal by competent professionals.
 - 2.3.4. Provide clear, accessible information on the location and condition of ACMs to anyone who may be at risk of disturbing them, including residents, contractors, and emergency services. Signage will be used in non-domestic or controlled-access areas where required by legislation; no asbestos labelling will be applied in homes or communal residential areas.
 - 2.3.5. Review and update the AMP as required to ensure it remains valid and aligned with property and regulatory changes.
 - 2.3.6. Ensure all asbestos-related works are planned and delivered by competent persons, with clear arrangements for communication, safe work methods, and post-work assurance, as set out in the AMP.
 - 2.3.7. Use Licensed Asbestos Removal Contractors (LARC)s for all licensed or notifiable work. In-house operatives may only undertake non-licensed work where full competency, training, and supervision standards under CAR 2012 are met.
 - 2.3.8. Provide asbestos awareness training appropriate to role, ensuring all staff and contractors understand how to prevent asbestos disturbance.

- 2.3.9. Embed safeguarding and equality considerations in asbestos management, including for young workers, people with disabilities, and vulnerable households.
- 2.3.10. Promote continuous improvement through independent assurance, audits, and regular performance reporting to the Executive Management Team (EMT) and the Audit and Assurance Committee.
- 2.4. While CAR 2012 does not impose a management duty for asbestos within domestic dwellings, HPG will meet wider health and safety obligations whenever works are carried out. As part of this commitment, asbestos management surveys have been completed across domestic properties and will continue for any newly acquired homes built before 2000.
- 2.5. HPG will review its strategic position on achieving comprehensive asbestos data coverage across domestic properties, assessing feasibility, cost, and risk. Any change in approach will be approved by the Board and reflected in the AMP.
- 2.6. Under the Construction (Design and Management) Regulations 2015, HPG will provide asbestos information and arrange necessary surveys or removal works to support the duties of the Principal Designer and Principal Contractor.
- 2.7. HPG recognises that failure to comply with CAR 2012 or related legislation may result in enforcement action by the Health and Safety Executive (HSE) and potential regulatory sanctions under the Regulator of Social Housing (RSH) framework.

3. Policy Scope

- 3.1. This policy applies to all staff, tenants, service users, visitors, contractors, third-party providers, and any other individuals who may be affected by the actions or omissions of HPG in relation to asbestos management.
- 3.2. This policy applies to all domestic and non-domestic premises, including care homes, supported housing, extra care schemes, and specialist housing accommodation which are owned or managed by HPG.
- 3.3. HPG is committed to full compliance with the RSH's regulatory framework, including the consumer standards applicable to social housing in England. This policy supports the delivery of the Home Standard, which requires registered providers to ensure tenants live in safe, well-maintained homes and that all health and safety obligations are met.

4. Definitions

- 4.1. **Competent/Competency:** Refers to individuals who possess the necessary training, skills, knowledge, and experience to perform the role, task, or responsibility assigned to them. Specific competency requirements are outlined in the Asbestos Management Plan.
- 4.2. **Non-Domestic Premises:** Includes all commercial properties, workplaces, and the communal or shared areas of residential buildings (such as hallways, stairwells, plant

rooms, and meter cupboards). This definition does not include individual self-contained dwellings

- 4.3. **Domestic Premises:** A self-contained dwellings (e.g. house, bungalow, or flat) occupied by a single household or family unit, with no shared communal areas.
- 4.4. **Management Survey (Re-inspection):** A standard assessment of asbestos-containing materials (ACMs) conducted during normal occupation and use of premises. It identifies ACMs that could be disturbed during routine activities, maintenance, or installation of new equipment. The survey involves minor intrusion and disturbance to assess the potential for fibre release.
- 4.5. **Asbestos Register:** A document or digital record containing the results of asbestos surveys, including the location, quantity, and condition of identified or presumed ACMs. It forms a core component of the Asbestos Management Plan.
- 4.6. **Asbestos Management Plan:** A document outlining how identified or presumed asbestos will be managed following a survey. It includes the identity of the Duty Holder, the Asbestos Register, action plans, training schedules, communication strategies, contingency measures, and emergency procedures.
- 4.7. **Premises Constructed Prior to 2000:** Any building constructed before the year 2000 should be presumed to contain ACMs and must be subject to an asbestos management survey. The use of ACMs was banned in the UK in 1999; therefore, buildings constructed from 2000 onwards are not expected to contain asbestos.
- 4.8. **P1 Action:** Refers to remedial actions identified through asbestos management surveys, categorised by risk level (low, medium, or high) and requiring prioritised attention.
- 4.9. **CADRE:** Housing Plus Groups' housing and property management system contains all data and information related to asbestos management, and the asbestos register is contained and accessible by staff.
- 4.10. **FILEIT:** HPGs document management file repository system where asbestos management surveys, risk assessment and other relevant documents are stored and accessible by staff.

5. Roles and Responsibilities

- 5.1. **The Board and Audit and Risk Committee** provide strategic oversight, ensure robust assurance frameworks are in place and monitor key compliance risks associated with asbestos management.
- 5.2. **The Chief Executive and Executive Team** lead the organisation's compliance culture by securing necessary resources, setting expectations and championing performance standards.
- 5.3. **The Executive Director of Investment and Growth** acts as the senior sponsor and executive lead for this policy, ensuring strategic alignment with broader asset and

compliance frameworks. They are also designated as the Health and Safety Lead in accordance with the Social Housing (Regulation) Act 2023.

- 5.4. **The Executive Director of Care and Support** holds designated responsibility for compliance with Care Quality Commission [“CQC”] regulations, including accountability for any prosecutions arising from failures to provide care and treatment in a safe manner. This includes any asbestos incident affecting regulated care services which will be reported to the CQC in line with statutory duties.
- 5.5. **The Director of Building Compliance & Safety** is responsible for operational oversight, performance management and leadership of compliance and associated teams to ensure policy delivery.
- 5.6. **Responsibilities for specific roles and teams** are defined within the Asbestos Management Procedures and corresponding job role descriptions. All staff and contractors are required to comply with this policy, the procedures manual and all associated legal obligations.
- 5.7. **Customers** must allow reasonable access for inspections, risk assessments and remedial works; report asbestos-related issues or faults promptly; and must not alter or tamper with any asbestos-containing materials.

6.0 Applicable Legislation and Guidance

- 6.1 This policy ensures compliance with the Regulatory Framework for Social Housing in England, including the Consumer Standards introduced by the Regulator of Social Housing from 1 April 2024. These include the Safety and Quality Standard, Transparency, Influence and Accountability Standard, Neighbourhood and Community Standard, and Tenancy Standard. It also aligns with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
- 6.2 The principal legislation underpinning this policy is the Control of Asbestos Regulations (CAR) 2012, which came into force on 6 April 2012.
- 6.3 The principal Approved Codes of Practice [“ACoPs”] and guidance documents applicable to this policy are:
 - **L143: Managing and Working with Asbestos (Second Edition, 2013):** The primary ACoP consolidating previous codes (L127 and earlier L143) into a single document covering all work with asbestos
 - **HSG264 – Asbestos: The Survey Guide (Second Edition, 2012):** Provides detailed guidance on conducting asbestos surveys. While not an ACoP, it is widely recognised as best practice.
 - **HSG248 – Asbestos: The Analysts’ Guide (Updated Second Edition, 2021):** Replaces the 2006 edition and provides guidance for analysts involved in sampling, analysis, and clearance procedures.
 - **HSG247 – Asbestos: The Licensed Contractors’ Guide (2006):** Guidance for licensed contractors undertaking asbestos removal and related work.
 - **HSG227 – A Comprehensive Guide to Managing Asbestos in Premises (2002):** Offers practical advice for duty holders, though some content may now be superseded by L143 and HSG264.

- **HSG210 – Asbestos Essentials (Third Edition, 2012):** A task manual for building, maintenance, and allied trades involved in non-licensed asbestos work.

6.4 In addition to the Control of Asbestos Regulations 2012, this policy operates within the context of the following legislation:

- 6.4.1.1 Health and Safety at Work etc. Act 1974
- 6.4.1.2 The Management of Health and Safety at Work Regulations 1999
- 6.4.1.3 The Workplace (Health, Safety and Welfare) Regulations 1992
- 6.4.1.4 Personal Protective Equipment at Work Regulations 1992
- 6.4.1.5 Hazardous Waste (England and Wales) Regulations 2005 (as amended 2009)
- 6.4.1.6 Control of Substances Hazardous to Health (COSHH) Regulations 2002 (as amended)
- 6.4.1.7 Construction (Design and Management) Regulations 2015
- 6.4.1.8 Defective Premises Act 1972
- 6.4.1.9 Landlord and Tenant Act 1985
- 6.4.1.10 Data Protection Act 2018
- 6.4.1.11 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013

7.0 Policy Delivery Programme

7.1 HPG will carry out asbestos management surveys and reinspection's in accordance with the Control of Asbestos Regulations 2012 (CAR 2012), ensuring full compliance with statutory duties and recognised best practice.

7.2 Survey and monitoring frequencies will be determined by risk assessment and set out in the Asbestos Management Plan. Higher-risk schemes may be subject to enhanced monitoring or reduced inspection cycles.

7.3 Asbestos information will be reviewed when properties are refurbished, altered, or when existing data becomes invalid.

7.4 Communal and non-domestic premises will be managed in accordance with Approved Code of Practice L143 and relevant HSE guidance (e.g., HSG264 and HSG227).

7.5 Where asbestos-containing materials (ACMs) are identified, appropriate controls—including warning signage, record updates, and communication with those at risk—will be implemented in line with the AMP.

7.6 All asbestos-related work will be undertaken by competent persons. Licensed Asbestos Removal Contractors (LARCs) will be used for licensed or notifiable work, while in-house teams may undertake non-licensed work only where the competency and training standards under CAR 2012 are fully met.

7.7 Where access is refused or not obtained, escalation and legal access procedures will follow the organisation's compliance framework to ensure resident safety and regulatory adherence.

7.8 HPG will ensure that all asbestos waste is stored, transported, and disposed of in accordance with the Hazardous Waste (England and Wales) Regulations 2005 and other applicable legislation.

8.0 Follow-on Works

8.1 All asbestos inspections and surveys will classify findings in line with HSE guidance (HSG264 and HSG227).

8.2 Risk-based actions will be taken to control or remove ACMs in accordance with their assessed priority. High-risk materials will be isolated or remediated promptly; lower-risk materials will be managed through routine inspection and monitoring.

8.3 Where surveyors identify areas requiring further investigation—such as inaccessible voids or unconfirmed materials—targeted reinspections or Refurbishment and Demolition (R&D) surveys will be arranged before intrusive works proceed.

8.4 All asbestos-related documentation, including survey results, risk assessments, remedial action records, and clearance certificates, will be retained in secure electronic systems and available for audit and assurance purposes.

9.0 Data and Records

9.1 Information about the location and condition of asbestos in non-domestic premises, including communal areas of residential buildings, will be made available to anyone liable to disturb it, such as contractors and emergency services.

9.2 Although CAR 2012 does not require asbestos information to be shared with tenants, HPG considers this best practice and will inform residents of any known asbestos risks within their homes or communal areas, particularly before maintenance or refurbishment works.

9.3 Asbestos records will be maintained in a secure electronic format, kept up to date, and retained for at least ten years or longer where required by law.

9.4 The designated responsible officer will ensure data accuracy and accessibility for operational, audit, and regulatory purposes.

9.5 All asbestos management information will be handled in compliance with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.

10.0 Resident Communication and Engagement

10.1 Residents will be provided with adequate notice ahead of all scheduled asbestos surveys, reinspection's or remedial works, in line with legal requirements and HPG's customer service standards.

10.2 Resident engagement forums will be used to involve tenants in the ongoing review and development of asbestos management practices, ensuring transparency, accountability, and continuous improvement in line with HPG's

wider compliance strategy.

11.0 Competency and Training

- 11.1 **Contractor Qualifications and Licensing:** HPG will only use contractors who can demonstrate a valid licence, competence, and compliance, regardless of licence duration.
- 11.2 **Internal Staff Training:** Internal staff involved in asbestos management, compliance monitoring, or service delivery must receive formal refresher training every two years, aligned with their roles and responsibilities, and in accordance with Regulation 10 of CAR 2012, which mandates training for anyone liable to disturb asbestos during their work.
- 11.3 **Internal Operative Training:** In-house operatives engaged in the removal of non-licensed ACMs must also be included in HPG's competency matrix and subject to ongoing review to ensure their work complies with best practice and legal standards.
- 11.4 **Competency of Asbestos Workers:** All individuals carrying out asbestos surveying, removal, or remedial works on behalf of HPG must be:
- Trained and competent for the specific type of asbestos work (licensed, non-licensed, or notifiable non-licensed work),
 - Medically surveilled where required,
 - And, where applicable, licensed by the HSE for higher-risk activities.
- 11.5 **Training Matrix and Compliance Reviews:** HPG will maintain a training and competency matrix for all roles involved in asbestos-related activities. Quarterly reviews will be conducted to:
- Monitor compliance with CAR 2012,
 - Identify training and medical surveillance needs,
 - Support continuous professional development and legal adherence.

12.0 Performance Monitoring

- 12.1 HPG will monitor and report the performance of its Asbestos Management Programme through defined Key Performance Indicators (KPIs) and governance frameworks approved by the Executive Management Team (EMT) and the Audit and Risk Committee.
- 12.2 KPI definitions, targets, and reporting arrangements are maintained within the Asbestos Management Plan (AMP) and the Compliance Performance Framework.
- 12.3 Performance information will be used to identify trends, manage emerging risks, and support continuous improvement in asbestos compliance across all property types.

13.0 Quality Assurance

- 13.1 HPG will operate a proportionate, risk-based quality assurance regime to verify the accuracy and effectiveness of asbestos management activities.
- 13.2 Quality assurance measures will include internal reviews, validation of survey and reinspection data, and periodic independent audits by competent third-party specialists.
- 13.3 The scope, frequency, and methodology of quality assurance activities are set out in the Asbestos Management Plan and associated procedures.

14.0 Non-Compliance and Escalation

- 14.1 HPG will monitor asbestos compliance performance and manage non-compliance in accordance with internal governance and escalation arrangements to ensure timely resolution and accountability.
- 14.2 Escalation criteria, reporting thresholds, and corrective action processes are defined within the Asbestos Management Plan and Corporate Compliance Framework.
- 14.3 Where significant or systemic asbestos risks are identified, immediate notification will be made to the EMT, and any statutory notifications will be completed in accordance with regulatory requirements.

	Policy Control Sheet Asbestos Management Policy Policy reference number - 2025/016
Policy Author	David Nicholls – Director of Building Compliance and Safety Nick Pike – Resident Safety Manager
Direct Lead	David Hall Executive Director of Investment and Growth
Version	1.0 – December 2025
Target audience	Staff, tenants, service users, visitors, contractors and third-party providers
Consultation	Wrekin Voices Customer Partnership Panel Directors Operational Delivery Teams Executive Management Team Audit & Risk Committee
Date of Equality Impact Assessment	An Equality Impact Assessment was completed on the 7 th January 2025.
Date of Data Privacy Impact Assessment	Not required.
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Policy category	Health and Safety
Associated policies and procedures	Asbestos Management Procedures Building Safety Policy Corporate Health and Safety Policy
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Summary of changes table

Revision history			
Author	Summary of changes	Version	Authorised by & date
D.Nicholls & N.Pike	New HPG policy, bringing together the two legacy organisations approaches	1.0 - December 2025	Executive Management Team – 18.12.25