

Written evidence from NASUWT - The Teachers' Union (ASB0024)

1. The NASUWT welcomes the opportunity to provide evidence for the Work and Pensions Select Committee's inquiry into how the Health and Safety Executive (HSE) manages the continued presence of asbestos in buildings.
2. The NASUWT - The Teachers' Union - represents teachers and headteachers across the United Kingdom.

GENERAL COMMENTS

3. The NASUWT has had longstanding concerns around the HSE's management of asbestos in buildings.
4. As the Teachers' Union, the NASUWT is primarily concerned with the management of asbestos in school buildings.

SPECIFIC COMMENTS

What are the current risks posed by asbestos in the workplace? Which groups of workers are most at risk?

5. The Department for Education's (DfE's) Asbestos Management Assurance Process (AMAP) survey of schools found that 80.9% of schools responding to the survey stated asbestos is present on their estate.¹ This means that hundreds of thousands of teachers and pupils are at daily risk of exposure, especially as the asbestos in buildings is often accessible.

¹ Department for Education, Asbestos Management Assurance Process, July 2019, pg. 6.
<https://www.gov.uk/government/publications/asbestos-data-collections>

6. Schools are unique in terms of workplaces due to a number of factors, including that they contain large numbers of children. This brings in factors that are not fully considered in the HSE's approach to management of asbestos, which often considers schools akin to offices.
7. This includes failing to appreciate that children behave differently to adults, such as being more boisterous, more likely to disturb the fabric of the building, and more likely to enter areas they should not.
8. This makes schools inherently more dangerous where asbestos is present than a similar sized office.
9. Data and research also show that both pupils and teachers are at higher risk of asbestos-related disease.
10. The UK's Committee on Carcinogenicity recently estimated that the lifetime risk of a child first exposed to asbestos at age 5 compared with an adult exposed at age 25 was about 3.5 times greater, and five times greater than an adult first exposed at age 30.²
11. Teachers also have a statistically significant higher risk of developing mesothelioma than the general population.
12. The HSE's latest mesothelioma mortality figures highlight that female teachers statistically have a significantly elevated Proportional Mortality Ratio (PMR), with female primary and nursery teachers highlighted as especially high, with 75 deaths between 2011 and 2019 and a PMR of 213.³

² Committee on Carcinogenicity of Chemicals in Food, Consumer Products and the Environment, Statement on the Relative Vulnerability of Children to Asbestos Compared to Adults.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/315919/vulnerability_of_children_to_asbestos.pdf

³ Health and Safety Executive, Mesothelioma mortality by occupation statistics in Great Britain, 2021. <https://www.hse.gov.uk/statistics/causdis/mesothelioma/mesothelioma->

How effective is the current legislative and regulatory framework for the management of asbestos?

13. The NASUWT has significant concerns around the policy of management in situ, whereby it is deemed safer to manage asbestos rather than remove it. This allows exposures to asbestos to continue to occur, and there are numerous recent examples of accidental release both in schools and other non-domestic premises.
14. When coupled to the HSE's policy of not proactively inspecting schools, this means the safety of teachers and pupils in schools is predicated on school dutyholders understanding and following the regulations meticulously, whilst having little fear of enforcement action being taken.
15. The NASUWT firmly believes that without enforcement, regulations are extremely weak.
16. Despite the regulations calling for all premises to be surveyed and asbestos-containing materials to be regularly inspected and labelled, we know that this is not happening because of the number of prosecutions of schools for allowing workers to become exposed.
17. Similarly, although the Control of Asbestos Regulations 2012 (CAR12) state that there must be adequate measures for monitoring asbestos-containing materials (ACMs), the NASUWT has encountered situations where management surveys have not been carried out for many years. The DfE AMAP survey found that almost half (49.7%) of schools had not conducted an asbestos management survey in the last three years.⁴ The Regulations should therefore be strengthened to include a maximum period between surveys, not exceeding three years.

[mortality-by-occupation.pdf](#)

⁴ *Op. cit.*, pg. 22.

18. This is also exemplified by the fact that 676 schools were recently referred to the HSE by the DfE as causing concern.⁵ This means that thousands of teachers and pupils were at risk due to schools not following the relevant regulations.
19. The NASUWT's position is that any asbestos present in a school building presents a risk, and should be removed via a programme of phased removal based on condition and location of the asbestos.

How does HSE's approach to managing asbestos compare to the approach taken in other countries? Are there lessons that the UK could learn from best practice elsewhere?

20. Many other countries, such as Netherlands, Germany, France, Poland and Australia, have programmes to remove asbestos from public buildings. In stark contrast, the HSE continues to promote management in situ, which, as stated above, is fundamentally unsafe.
21. The UK is therefore failing to learn lessons or follow best practice from other countries.

How does HSE measure and report its progress in mitigating the risks of asbestos?

22. Whilst the HSE measures and publishes numerous reports related to the impact of asbestos, such as various fatality and mortality figures, these give an incomplete picture of the situation.
23. The reports that are published, as referenced above, show an increasing prevalence of asbestos-related disease, particularly in female teachers.

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<https://www.britsafe.org/publications/safety-management-magazine/safety-management-magazine/2019/asbestos-risk-to-children-and-teachers-in-676-uk-schools/>

24. The fact that occupational mesothelioma deaths do not include anyone over the age of 75, despite the average age of onset being 74, means that the prevalence rates are likely to be significantly underestimated.
25. In addition, the fact that routine HSE inspections of all schools have not occurred for some time would make it impossible for the HSE to state whether it is making progress in mitigating the risks of asbestos in schools.

Does HSE keep adequate records of asbestos in public buildings?

26. The NASUWT has longstanding concerns that there are insufficient records held on the location and condition of asbestos in schools by Governments and devolved administrations.
27. Without effective intelligence on the location and condition of asbestos, a national programme of phased removal would be exceedingly difficult.
28. Notwithstanding this, the NASUWT does not believe it should be the HSE's duty to keep such records. The purpose of the HSE is to advise on regulations, monitor the application of regulations, and, where necessary, take enforcement action to ensure compliance with regulations.

Is HSE making best use of available technology and systems to monitor the safety of asbestos which remains in buildings?

29. The main issue here is again the lack of routine proactive inspection of schools in relation to asbestos. This makes the question of whether the HSE is making the best use of available technology a moot point.

30. The HSE could have state-of-the-art technology for monitoring the safety of asbestos, but without inspections it would serve little purpose.
31. There are, however, specific areas where the Asbestos Regulations can be strengthened and improved. The control limit for asbestos is currently 0.1 asbestos fibres per cubic centimetre of air (0.1 f/cm³) and the 'clearance level' for certification for reoccupation following licensable work is 0.01 f/cm³. The current threshold levels should be reviewed by the HSE to take account of the latest scientific and medical evidence on asbestos exposure limits, including any evidence that relates specifically to children of school age. In addition, the recommended method of testing for airborne asbestos fibres remains based upon the World Health Organisation (WHO) recommendations from 1997.
32. The HSE should review asbestos measurement techniques and methodologies, including technological advancements in the measurement of airborne asbestos fibre concentrations, which allow for more accurate measurements to be observed.

Does HSE commit adequate resources to asbestos management in line with the level of risk?

33. The NASUWT has a general concern that the HSE is badly underfunded, having had its budget cut by over 50% in real terms since 2010. These cuts have impacted on all areas of the HSE's activities, including asbestos management. Over the same time, the number of inspectors has also been cut by a third.
34. Asbestos is still the biggest single cause of workplace deaths, with over 5,000 people currently dying per year. Although the general numbers appear to have peaked, the numbers of teachers is still rising.

35. The condition of the school estate, and the asbestos contained within, is deteriorating. The DfE's *Condition of School Buildings Survey* found that *'the total condition need, defined as the modelled cost of the remedial work to repair or replace all defective elements in the school estate, is £11.4 billion'*.⁶
36. When coupled with the fact that asbestos is present in more than 80% of schools, these figures demonstrate the scale of the problem in the school estate, yet the HSE commits very few resources to monitoring the condition of asbestos in schools.
37. The HSE requires a major increase in funding in order for it to commit adequate resources to asbestos management in line with the level of risk

How robust is the available data about the risks and impact of asbestos in the workplace? What gaps in evidence need to be filled?

38. As stated above, the current occupational data is inadequate and does not reflect the working lives of those diagnosed with mesothelioma.
39. In addition, there is no estimate of the actual risk to pupils developing mesothelioma from current exposure in schools.

Is HSE drawing on a wide body of international and national regulatory and industry expertise to inform its approach to the management of asbestos safety in buildings?

40. In general, based on the HSE documentation such as the Annual Science Review, it appears that the HSE does draw on a wide range of national and international expertise.

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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/989912/Condition_of_School_Buildings_Survey_CDC1_-_key_findings_report.pdf

41. This does not, however, appear to translate into learning effective lessons from national and international expertise as exemplified in the retention of the flawed management in situ approach.

How effectively does HSE engage with external stakeholders and experts about its approach to the regulation of asbestos?

42. The HSE does engage with external stakeholders on the subject of asbestos. For example, there are regular keeping-in-touch meetings between the HSE and the education trade unions, and the HSE also attends the DfE's Asbestos in Schools Steering Group.
43. The main problem is with the HSE's approach, not necessarily a lack of engagement. A lack of enforcement activity coupled with a flawed approach of management in situ means that the risks from asbestos remain.
44. Until the HSE is adequately resourced to carry out effective monitoring and enforcement, and a programme of phased removal which is sufficiently funded by the Government is enacted, the risks due to asbestos will remain.

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