Policy title	**Asbestos Management Policy**
Summary	This policy and its supporting procedures and control documents aim to protect people from asbestos-related risks.
Scope	This policy applies to all properties owned or managed by MSV.
Author & Job Role	Callum Jones – Director of Asset Strategy
Business Area	Homes – Asset Strategy
Document Status	Final V8.0
Document Reference	Homes – Asset Strategy/Asbestos Management Policy/2.0
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EIA completed **Other IAs completed**	14 September 2026 N/A
Consultation	Senior Leadership Team Compliance Team North Star Environmental Limited

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1. Introduction & Policy Purpose

The overall aim of this policy, and the associated procedures and control documents is to ensure the safety from asbestos release for people living and working in properties, owned or managed by Mosscare St Vincent's [MSV].

MSV aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with asbestos so far as is reasonably practicable.

This document sets out key policy objectives, control measures and accountabilities for ensuring safety from harm. This purpose of this policy is to ensure MSV meets its obligations under the following legislation:

- The Health and Safety at Work etc. Act 1974;
- The Management of Health and Safety at Work Regulations 1999;
- The Housing Act 2004 which introduced the Housing Health and Safety Rating System (HHSRS) and the Housing Health and Safety Rating System Regulations 2005.
- Control of Asbestos Regulations 2012
- The Landlords and Tenants act 1985
- The Construction (Design and Management) Regulations 2015
- The Workplace (Health Safety and Welfare) Regulations 1992
- Hazardous Waste (England and Wales) Regulations 2005
- The Defective Premises Act 1972 in England and Wales
- HSG227 A Guide to Managing Asbestos
- HSG264 Asbestos Survey Guide
- HSG210 Asbestos Essentials
- HSG248 The Analysts' Guide (2nd Edition)
- HSE INDG223 Managing Asbestos in Buildings
- BS60024 2006 Sampling Procedures for Inspection

The application of this Policy ensures that MSV meets compliance with the outcomes of the Regulatory Framework for Social Housing in England introduced by the Homes and Communities Agency as outlined below:

(Registered Providers must) meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes)

2. Scope

This policy applies to all properties owned or managed by MSV.

3. Definitions

The key MSV policy objectives are:

1. Prepare and disseminate an “Asbestos Management Plan” (AMP) for the portfolio.

2. Appoint persons with clear roles and responsibilities to manage the risk associated with asbestos containing materials (ACMs).

3. Risk Assess our portfolio to identify the “asbestos status” of our assets, introduce default position and develop a survey strategy to locate ACMs.

4. Establish and keep up to date, a record of the location and condition of all known and presumed asbestos containing materials (The “Register”).

5. Undertake material risk assessment of all known and presumed ACMs and develop procedures to evaluate the risk and determine the appropriate remedial actions and control measures.

6. Monitor the condition of all known ACMs through an annual re-inspection to all ACMs within communal areas.

7. Ensure ACM information is provided to every person with the potential to disturb asbestos, including building occupiers/tenants and anyone undertaking work within one of our assets, or at risk within our buildings from ACMs.

8. Ensuring that the immediate measures taken prevent or minimise exposure to airborne asbestos fibres in the event of emergencies or unexpected situations requiring sudden and urgent action.

9. Introduce a permit to work scheme which restricts work which has the potential to disturb ACMs without appropriate safe systems of work in place and ensure competence of operatives.

10. Annually review the job profiles, skills, knowledge and experience of those staff involved in the delivery of this policy and, where necessary, provide training so that they can deliver this policy.

4. Roles and Responsibilities

The accountabilities for implementation of this policy are as set out below:

1. The Chief Executive retains overall accountability for the implementation of this policy and is the named Duty-holder.

2. The Executive Director – Homes is responsible for overall policy implementation and ensuring that adequate resources are made available to enable the objectives of the policy to be met.

3. The Director of Asset Strategy and Director of Development & Investment are responsible for delivery of the key policy objectives as set out herein, including designing and implementing procedures, staff training, and communication to customers.

4. The Head of Compliance and Building Safety is responsible for updating & maintaining the Register, and accountable for achieving the targets associated with the key policy objectives.

5. The General Compliance Lead (Asbestos, Legionella & Lifts) is responsible for operational delivery, including the management of all contractors carrying out works that may disturb asbestos works and those carrying out asbestos surveys.

6. The Neighbourhoods & Independent Living Teams shall support asset management and contactors' teams in gaining access to carry out asbestos surveys and work.

7. The Director of Asset Strategy is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations.

5. Monitoring, Review & Evaluation

The effectiveness of this policy will be monitored using a set of performance measure as below:

Measure	Target	Min. Reporting Interval	Reviewed by
% of known risks which have been assessed	100%	Monthly	Head of Compliance and Building Safety - Weekly Director of Asset Strategy - Monthly Customer & Communities Committee and Board - Quarterly
% risks which have been reviewed in accordance with level of risk and appropriate timescales	100%		
% risks with outstanding actions/control measures by risk level	0%		
Volume of overdue risk by risk classification	0		

Policy implementation will be reviewed:

1. Monthly by the Director of Asset Strategy via SLT.
2. At each Committee and Board meeting via the regular Asset Compliance report.
3. By the MSV external & internal audit teams, as required, and a report provided to the Audit & Risk Committee or Strategic Safety Forum.

The operational oversight of this policy will sit at the Strategic Safety Forum.

6. Related Documents

6.1. The Asbestos Management Plan (AMP)
6.2. Operation Procedures 1-10
6.3. AMP Appendices 1-21

7. Version History

Version	Date	Description/Summary	Status	Author
V1.0	06/06/2018	New policy launch – date of first approval.	Approved	Philip Glover
V2.0	09/14/2019	Annual review with minor revisions.	Approved	Callum Jones
V3.0	09/14/2021	Annual review with minor revisions.	Approved	Callum Jones
V4.0	09/14/2022	Annual review with minor revisions.	Approved	Callum Jones
V5.0	09/14/2023	Annual review with minor revisions.	Approved	Callum Jones
V6.0	09/14/2024	Annual review with minor revisions.	Approved	Callum Jones
V7.0	03/10/2025	New template with minor revisions.	Approved	Callum Jones
V8.0	14/09/2026	Annual review with minor revisions	Approved	Callum Jones

8. Delivering the Policy/Procedure

MSVs Asbestos Management Plan (FSMP) details the processes in which risks associated with fire safety are managed. This document explains how MSV meet the requirements of this policy.

Its purpose is to clearly set out the management arrangements that have been put in place, identify the responsibilities of teams, individual staff members and contractor's personnel and clarify the core processes designed to ensure effective implementation.

This document must be followed by all employees, customers and stakeholders of MSV to understand the obligations placed upon them to maintain a safe environment within all properties owned or managed by MSV.

9. Appendices

9.1 Accidents, Incidents & Enforcement

Detailed processes for dealing with incidents, RIDDOR reporting requirements and MSV's response to any enforcement action is set out in the Asbestos Management Plan (AMP).

The Head of Compliance and Building Safety will investigate all asbestos incidents ensuring the emergency procedures as set out in the AMP are followed.

Following any asbestos incident, the Head of Compliance and Building Safety will provide a report identifying the root cause of the incident and recommendations to prevent reoccurrence.

10. Impact Assessments

Equality Impact Assessment (EIA)

Name of Policy	MSV Asbestos Management Policy	
Date of Assessment	14th September 2026	
Name & Role of Assessors	Callum Jones – Director of Asset Strategy	
What are the desired outcomes of the policy?	The overall aim of this policy, and the associated procedures and control documents is to ensure the safety from asbestos release for people living and working in properties, owned or managed by Mosscare St Vincent's	
Who are the main stakeholders in relation to the function?	Occupiers of our properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with asbestos so far as is reasonably practicable.	
Who will be consulted and what types of consultation will be carried out?	People & Talent, Compliance, Customer Services, Health & Safety, Property Care, Development, Asset Management.	
Summarise any evidence considered	SharePoint Link: 2026 Review Comments	
Could the function have a differential impact on:		**What evidence exists to support your analysis?**
	Yes / No	
Race Consider language and cultural factors	Yes	Where it becomes apparent that customers require communication in a language other than English, such communication will be translated beforehand, or conversations held through Language Line.
Gender reassignment Consider people proposing to or have undergone a process of having their sex reassigned.	No	
Disability Consider physical, visual, aural impairment, mental, learning difficulties	Yes	Where it becomes apparent through the vulnerability markers that customers have learning difficulties or other impairments such as hearing or visual, MSV will accommodate their individual needs throughout the process.
Age Consider Elderly or young people	No	
Sexuality Either know or perceived	No	

Gender	No	
Religion or belief Consider religious or cultural observance including non-belief, practices of worship	Yes	Where it becomes apparent that customers hold specific beliefs, cultural considerations will apply both while carrying out home visits, and also during religious celebrations when arranging appointments.
Other protected or vulnerable characteristics: • marriage or civil partnerships • pregnancy or maternity?	No	

In what areas could the differential identified be considered to have an adverse impact in this function and what solutions will be introduced to overcome these adverse impacts?	Where it becomes apparent that customers require communication in a language other than English, such communication will be translated beforehand, or conversations held through Language Line. MSV will accommodate customers individual needs throughout the process when identified as having learning difficulties or other impairments such as hearing or visual, through vulnerability markers. For customers who hold specific religious beliefs, cultural considerations will apply both while carrying out home visits, and also during religious celebrations when arranging appointments.
In what areas could the differential identified be considered a positive impact in this function and what strategies will be introduced to safeguard and spread these positive impacts?	These functions will improve the customer experience to ensure the process is followed, understood and cause minimal adverse impact to the customer. This will be achieved through specific consideration of their individual needs.
Which Action Plans have these solutions/strategies been transferred into?	Asbestos Management Plan (AMP) and associated appendices.
Who will be responsible for monitoring these Action Plans?	The Head of Compliance and Building Safety along with the Compliance Lead are responsible for monitoring these action plans.

Ratified by: SLT/Executive **Date: 16 October 2026**