

# Asbestos Policy

The purpose of this policy is to outline the Trust's arrangements for Asbestos management within its properties including operational procedures to ensure it meets its statutory obligations.

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## 1.0 Quick Look Summary

The purpose of this policy is to outline the Trust's management arrangements for the Asbestos management within its properties including operational procedures to ensure it meets its statutory obligations.

The organisation has a wide range of teams and services operating from a large number of properties making up our overall estate. The combination of mix and ageing condition of the estate means that the organisation has a number of properties that may contain asbestos.

The organisation has made a commitment to manage all of its estates and all tasks carried out within in a safe and appropriate manner to reduce the risk to health of all staff, patients and visitors

Everyone is responsible for complying with the organisations arrangements for the Asbestos management, including the implementation of local management controls. In order to comply with this policy, all staff must be aware of the lines of communication and levels of responsibility, which exist to ensure that all matters of Asbestos management are dealt with effectively.

**PLEASE NOTE THAT THIS LIST IS DESIGNED TO ACT AS A QUICK REFERENCE GUIDE ONLY AND IS NOT INTENDED TO REPLACE THE NEED TO READ THE FULL POLICY**

### 1.1 Version Control and Summary of Changes

Version number	Date	Comments
1	March 2011	Harmonisation of three predecessor organisations
2	Sept 2013	Review of document
3	March 2016	Policy extended due to no legislative updates or changes to arrangements
4	January 2019	Policy reviewed – Privacy Impact Assessment (Appendix 5) included
5	May 2023	Policy reviewed to reflect changes in the provision of Estates & Facilities Services & transferred to new policy template
6	Jan 2024	Update policy

## 1.2 Key individuals involved in developing and consulting on the document.

Name	Designation
Paul Thomas	Interim Head of Estates
Peter Pierce	Compliance Manager
Trust Policy Experts	

## 1.3 Governance

Level 2 or 3 approving delivery group	Level 1 Committee to ratify policy
EMEC	Finance & Performance Cttee

## 1.4 Equality Statement

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account the provisions of the Equality Act 2010 and promotes equal opportunities for all. This document has been assessed to ensure that no one receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

## 1.5 Due Regard

LPT will ensure that Due regard for equality is taken and as such will undertake an analysis of equality (assessment of impact) on existing and new policies in line with the Equality Act 2010. This process will help to ensure that:

- Strategies, policies and procedures and services are free from discrimination.
- LPT complies with current equality legislation.
- Due regard is given to equality in decision making and subsequent processes.
- Opportunities for promoting equality are identified.

Please refer to due regard assessment (Appendix 4) of this policy

## 1.6 Definitions that apply to this policy

<b>Action Level</b>	One of the following cumulative exposures to asbestos over a continuous 12-week period, when measured or calculated by a method approved by the Health and Safety Commission, namely: <ul style="list-style-type: none"> <li>a. Where the exposure is solely to chrysotile, 72 fibre-hours per millilitre of air;</li> <li>b. Where exposure is to any other form of asbestos either alone or in mixtures, including mixtures of chrysotile with any other form of asbestos, 48 fibre-hours per millilitre of air; or</li> <li>c. Where both types of exposure occur separately during the 12-week period concerned, a proportionate number of fibre-hours per millilitre of air.</li> </ul>
<b>Adequate</b>	Means adequate having regard only to the nature and degree of exposure to asbestos and "adequately" shall be construed accordingly.
<b>Approved</b>	Means approved for the time being in writing by the Health and Safety Executive.
<b>Asbestos</b>	Means the following minerals; crocidolite, amosite, chrysotile, fibrous actinolite, fibrous anthophyllite or fibrous tremolite or any mixture containing any of those minerals.
<b>Asbestos Management Plan</b>	Is a document generated out of the Invida Facilities Management software Asbestos Module
<b>Control Limit</b>	Is a maximum concentration of asbestos fibres in the air (averaged over a 4 hour period) that must not be exceeded. The Asbestos Regulations 2012 have a single control limit for all types of asbestos of 0.1 fibres per cm <sup>3</sup> .
<b>Control Measures</b>	<b>Control measure</b> means a measure taken to prevent or reduce exposure to asbestos (including the provision of systems of work and supervision, the cleaning of workplaces, premises, plant and equipment, the provision and use of engineering controls and personal protective equipment).
<b>Designated Person</b>	This person provides the essential senior management link between board and the professional support teams and is identified as the responsible duty holder for the Trust.
<b>Personal Protective Equipment</b>	<b>Personal protective equipment</b> means all equipment (including clothing) which is intended to be worn or held by a person at work and which protects that person against one or more risks to his health, and any addition or accessory designed to meet that objective.
<b>Due Regard</b>	Having due regard for advancing equality involves: <ul style="list-style-type: none"> <li>• Removing or minimising disadvantages suffered by people due to their protected characteristics.</li> <li>• Taking steps to meet the needs of people from protected groups where these are different from the needs of other people.</li> <li>• Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.</li> </ul>

## 2.0. Purpose and Introduction

LPT attaches the greatest importance to the health, safety and welfare of its staff, patients and visitors. It is considered essential that management and staff should work together positively

to achieve an environment compatible with the proper provisions of services to patients, and where hazards of health of staff are reduced to a reasonably practicable minimum.

It is accepted that it is the responsibility of management to do all that is reasonably practicable to reduce the risks in the field of construction, operation and maintenance of buildings, plant, equipment and facilities, and to ensure the correct operation of all policies and procedures. Appropriate training and information will be provided by the Estates and Facilities provider.

It is the intention of LPT to ensure effective implementation of the aforementioned statements and to keep them under consideration in all aspects of health practice and decision making

The objective of this Asbestos Policy is to provide guidance to ensure that all appropriate steps are taken to comply with the duty to manage asbestos within the LPT and to comply with asbestos related legislation, approved codes of practice, guidance and relevant standards. In particular it will seek to prevent exposure and, where this is not reasonably practicable, to minimise the exposure of all persons.

This Asbestos Policy should be read in conjunction with the Asbestos Management Plan.

This Asbestos Policy applies to the control of asbestos containing materials (hereafter ACMs) in all premises owned and operated by LPT and to all employees and contractors involved in the construction, management, design, upgrading, refurbishment, extension, maintenance and operation of plant, equipment, buildings and engineering services.

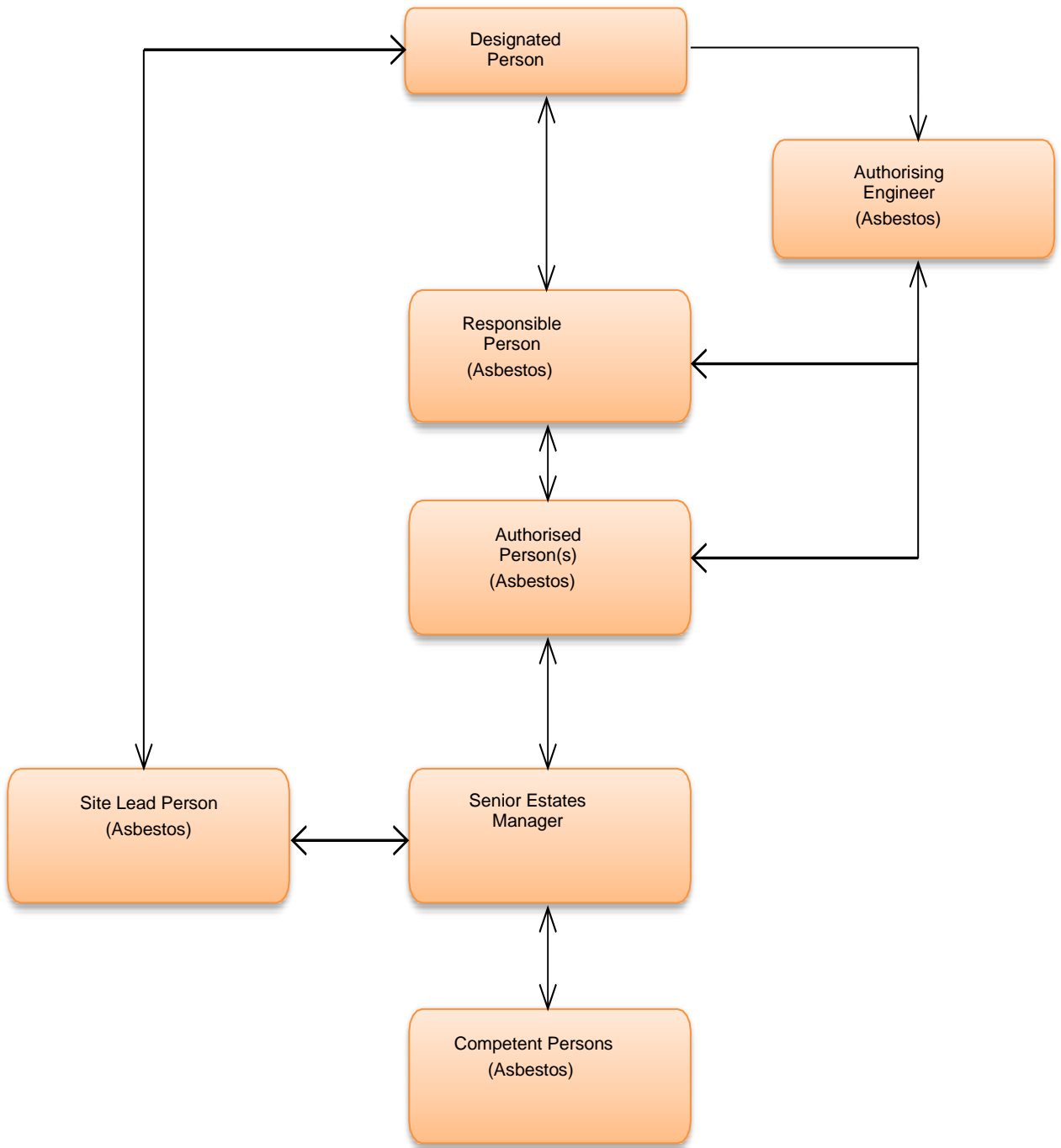
### **3.0 Duties within the Organisation**

Where ACMs are found on the LPT premises, the primary management of risk is the responsibility of the Estates team to manage the issue supported by the Authorised Person (Asbestos), in liaison with the local managers.

Estates & Facilities will maintain the Asbestos Register for each site, listing the location, type, and condition of the identified Asbestos Containing Materials (hereafter ACMs). This information will be held in an electronic format, within the Invida CAFM database asbestos module and shall be accessible via the Authorised Person.

In order to ensure that Asbestos is managed efficiently within the organisation, the following roles & responsibilities are allocated.

#### Management Hierarchy of Responsibility for the management of Asbestos



## **Duties within the Organisation**

The Trust Board has a legal responsibility for Trust policies and for ensuring that they are carried out effectively.

### **Responsible Person (Asbestos Management)**

The Responsible Person shall be the Director responsible for Estates & Facilities.

The key responsibilities of the Responsible Person will be to:

- Ensure surveys of LPTs estate are undertaken and take reasonable steps to determine the location of ACMs.
- Ensure that Asbestos Surveys are undertaken, and a written record of the locations of identified ACMs and presumed ACMs is maintained.
- Ensure that the risk of asbestos exposure is assessed, and the actions necessary to manage the identified risks is documented.
- To Appoint Authorised Person(s) Asbestos.

### **Authorising Engineer (Asbestos management)**

The AE is defined as a person designated by Management to provide independent auditing and advice on ventilation systems, to review documentation on verification and validation and witness the process as necessary.

### **Authorised Person (Asbestos Management AP)**

The Authorised Person shall be an appointed qualified technical engineer who has the key operational responsibility for the Management of Asbestos. The person will be qualified and sufficiently experienced and skilled to fully operate the specialist service.

Authorised Person (Asbestos) responsibilities are to:

Identify and train personnel to oversee the Asbestos Management Plan;

Update the Asbestos Register, which shall provide a record of the location, condition, maintenance and removal of all ACMs on LPT estate;

Arrange for the repair, sealing, labelling or removal ACMs, if there is a risk of exposure due to its condition or location;

Periodically monitor the condition of ACMs, update the Asbestos Register and reassess the risks;

Make information available to those who may come into contact or disturb ACMs, (information shall be provided in both written and electronic formats and shall be correct on the date it is issued);

Make arrangements to ensure that any work, which may disturb ACMs, complies with current legislation; and

Ensure that both the Asbestos Register and information contained in the relevant Risk Assessment are consulted prior to the commencement of works that may have the potential to bring staff into contact with asbestos



## **Managers (Asbestos Management)**

Estates Facilities will lead any activity relating to ACMs on our sites. Access to the Asbestos Register and Management Plan is available from E&F. Appropriate training will be provided to enable the individuals to discharge their duty (detailed in section 12). One of the key roles of the individual will be to ensure all contractors carrying out work on their site are aware of any asbestos risk located within their work area.

This register will be kept up to date by the Authorised Person with the assistance of Service Director/General Manager, as required, Asbestos Consultant and Appointed independent Consultant who is responsible for:

- Providing support to the appropriate LPT staff.
- Maintaining UKAS, or equivalent, accreditation, license and insurances relevant to instructed tasks.
- When requested, reviewing and commenting on Asbestos Works Specifications and, prior to commencement of the works, on the Contractor's Method Statement.
- Providing quotations for asbestos works including surveys, sampling, and removal supervision which reflect the anticipated project size and analytical requirements.

## **Employees**

All employees have an individual responsibility for Asbestos management in line with their duties and working environment. Each employee or agent of the organisation has an individual responsibility to:

- Co-operate with the organisations management in the implementation of this policy.
- Report any poor management of Asbestos to their supervisor/ manager.
- To undergo appropriate training as required.

## **Senior Estates Manager**

The Senior Estates Manager is responsible for day-to-day operational maintenance of LPT properties.

## **Contractors**

Other employers or individuals providing goods and/or services to the Trust shall be required to comply with Trust Policies and procedures with regard to Asbestos management. Specific requirements for Contractors will be specified by Estates & Facilities Senior Estates Manager.

## **Patients and Visitors**

Patients and visitors will be advised of all procedures in place for the Asbestos management and will be expected to comply with all reasonable requests.

## **Competent Person (Asbestos)**

Assessed and qualified specialist licensed Contractor who will carry out work associated with ACM's under the direction of the Authorised Person.

## 4.0 Arrangements

The following arrangements have been put in place for the management of ACMs.

- Asbestos must be dealt with on a priority basis, based upon the risk presented by the material. Assessment of risk shall take into account the potential for fibre release, the condition of the material, its location and the likelihood of the material being damaged or disturbed through the normal activity of Trust business.
- ACMs listed in the Asbestos Register will be assigned a risk classification in order to prioritise the risk. Progressive removal or substitution of ACMs will take place on a priority basis in areas where they are likely to be regularly worked on, disturbed or damaged through the normal activity of Trust business.
- ACMs which are not considered to be creating a significant risk may be left in-situ and consideration for removal may form part of a planned programme for replacement or upgrading of building stock.
- ACMs will be sealed in accordance with 'best practice'. Whenever they receive minor damage they will be resealed or removed as appropriate, it may be necessary to re-assess the Risk assessment in light of damage.
- When buildings are shut down for major refurbishment or a change of occupancy, the possibility of more extensive replacement programmes should be considered. A Refurbishment Survey as defined in HSG264 will advise management as the most appropriate action.
- Any areas where an asbestos survey has not been carried out will be subject to a 'precautionary approach'. This will entail assuming that all materials contain asbestos, unless there is strong evidence to indicate that they do not.

### 4.1 Asbestos Labelling

This applies to ACMs that are assessed as being appropriate to be "*left in situ*" and managed. All ACMs should be labelled where practicable unless an assessment has been made which would indicate a greater risk would be present if labelling were applied. This assessment should consider the risk of highlighting ACMs to staff and the public which may cause undue stress against the benefit to maintenance and other operatives who may come into contact with these materials.

### 4.2 Monitoring the Condition of Asbestos Materials Identified within the Asbestos Register

All staff have a duty to report any damage to ACMs, or to materials suspected of containing asbestos, to their manager.

The Authorised Person (Asbestos) will ensure that a system for the visual monitoring of ACMs is put in place and maintained. This monitoring will be carried out by a suitably qualified engineer in line with recommendation of the Asbestos Risk Assessment. This activity will be recorded using the LPT Estates and Facilities management software to ensure an audit trail is maintained.

### 4.3 Purchasing of Asbestos and Asbestos Products

In accordance with the regulations prohibiting the supply, import and use of asbestos and asbestos based products, the *Trust* will not knowingly purchase any such products or materials as prohibited by the Control of Asbestos Regulations 2012.

## **5.0 Infection Prevention and Control**

It is the responsibility of the Infection Prevention and Control Team to provide input for all matters relating to the hospital environment, maintenance of hospital buildings and engineering systems and to work with the Facilities Management Services Team including:

- Provide education for maintenance staff and management on infection control and reduction in Healthcare Associated Infections (HCAI's).
- Provide guidance and support when advice on controlling the environment is required.
- Provide advice on risk assessments for controlling the environment decisions.

## **6.0 Maintenance and Construction Activities**

It is the responsibility of the Senior Maintenance Manager and maintenance providers to ensure that the work activity required to be undertaken is recorded on the Estates and Facilities Invida Management Software package. This will ensure that a work order is generated which records the work activity and identifies the work area, automatically recording on the work order all known ACM's and provides risk sharing information for both Contractors, maintenance Operatives, site and Clinical management teams.

For larger schemes where there is a defined Construction area that are handed over to the Contractor, the information exchange may be undertaken through Contract Management arrangements (CDM) rather than the Estates and Facilities management Software package.

### **Construction, Alteration, Refurbishment & Demolition**

When undertaking any of the above activities a Refurbishment/Demolition Survey as defined in HSG264 must be attained. And the advice and guidance of the Authorised person(s) (Asbestos) should be sought.

### **Routine Maintenance**

All Trust premises considered to be at risk of Containing ACMs have been assessed in line with a Management Survey as defined in HSG264; as such no routine maintenance should be undertaken without a Work Order from the Invida facilities management software system being issued to the person undertaking the work in order for appropriate ACM information to be shared.

### **Non Routine Maintenance activities**

Where works of this nature are required the advice of the Authorised person (Asbestos) should be sought to determine the appropriate precautions.

### **Encountering Unidentified Suspect Materials**

If suspect materials are encountered during the course of normal work activities within LPT premises or one of the activities identifies in Section 10 of this document, then this should be reported immediately and recorded through routine management structures to enable an evaluation of the material to be undertaken and appropriate precautions and actions to be undertaken.

## 7.0 Training

A Training needs analysis has been undertaken and this policy has identified specific training requirements.

All training delivered within the Trust will be part of an endorsed model of training relevant for the service area.

The governance group responsible for monitoring the training is EMEC with support and assurance provided to the Health and Safety Committee

All members of staff including those with managerial responsibilities for ACMs should also receive training commensurate with their duties.

<b>Role</b>	<b>Training Requirement</b>
Authorised Person	The British Occupational Hygiene Society P405 Management of Asbestos in Buildings
Site Lead Person	Asbestos awareness and in house asbestos management course
Maintenance Managers	Asbestos Awareness
Maintenance Operatives, Contractors	Asbestos Awareness
All other Staff including Designated and Responsible Persons	Asbestos awareness information supplied in leaflet format supplied at induction and mandatory training

### Training (Estates and Maintenance Staff)

Personnel carrying out maintenance of Ventilation Systems will receive suitable training which includes information about any significant hazards arising due to their maintenance activities which may either affect them personally or any other person who may be affected by their actions or omissions. Training records shall be kept up to date for all staff. LPT Estates and Facilities will maintain these and make available on request.

## 8.0 Asbestos Removal

Bulk, or high-risk asbestos removal and major work involving ACMs shall only be carried out by licensed contractors who will have received training as detailed in Chapter 4 of HSG247 Asbestos "The Licensed Contractors Guide". All asbestos remedial works shall be engaged through the Responsible Person and the Authorised Person (Asbestos) must be involved in the scoping of the works and the licensed contractor engagement process. The Appointed Person shall be responsible for the supervision of contractors and will ensure that their work is carried out in accordance with the relevant legal requirements and HSE codes of practice. Other low risk asbestos works may be carried out by

experienced qualified staff, subject to a suitable and sufficient Risk Assessment, Method Statement and Permit-to-Work.

Prior to the commencement of works by a licensed contractor, the Contract Manager shall notify the Asbestos Authorised Person and consult with the relevant Site Lead Person. The Authorised Person and the Trust Contract Manager shall ensure that arrangements for HSE Notification, Permits-to-Work, Clearance Certificates and environmental monitoring are in place.

Asbestos Survey Reports must be made available to the contractor by the Contract Manager responsible for the proposed work. After the satisfactory completion of the works, the Contract Officer must ensure that all asbestos related information from the project is entered into the Asbestos Register (Invida) and the details forwarded to the Authorised Person (Asbestos) to ensure that information about the site is kept up to date.

## **9.0 Audit of Asbestos left in Situ**

ACMs left in-situ must be managed in accordance with the requirements defined

Within the LPT Asbestos Management Plan Part A and B, regular checks should be carried out to assess its condition (at least annually, or more frequently if deemed as appropriate);

- The Asbestos Management Plan should be reviewed and revised when appropriate.
- The Asbestos management Plan should be reviewed and revised when changes occur.

The Authorised Person (Asbestos) shall ensure that:

- The Asbestos Policy is reviewed routinely.
- Records and data held on the Invida System are both up to date – these records should be made available for inspection by the Health and Safety Executive, if required.
- A main audit must be carried out each year which will involve producing a report on compliance. and findings will be distributed to Service Director/General Manager and Site Lead persons.

## **10.0 Monitor and Review of Asbestos Management Arrangements**

The Authorised Person (Asbestos) will ensure that on a routine basis the Asbestos Policy and accompanying Management Plan Part A are reviewed. (Contact E&F for Management Plans).

It is also the Authorised Persons responsibility to ensure the effectiveness of the management arrangements, these should be assessed as part of the annual review the results of the Asbestos Audit should be forwarded to the Site Lead Person, or other locality managers and Estates & Facilities Annual report submitted to the Health and Safety Committee and EMEC.

Every third year the Authorised person will appoint a qualified asbestos Consultant to review and update the records held within the Invida Asbestos Module Database.

## **11.0 Records**

Records relating to asbestos shall be kept for a minimum of the life of the building plus 25 years. Any changes in condition, removal etc shall be recorded; this information will be within the asbestos module of the Invida database.

The site specific Asbestos Management Plans will be made available to the Site Lead Person and upon request.

Should any works be required to be undertaken these reports should not be considered as the latest edition and condition of the status of ACMs as changes may have occurred following the production of these reports. Always seek advice for the Authorised person (Asbestos).

## 12.0 Policy Monitoring and Review

This policy shall be reviewed at a minimum frequency of bi-annually. It should also be reviewed when substantial changes occur in the organisational structure of the organisation or property portfolio or when significant changes to legislation occur.

## 13.0 Monitoring Compliance and Effectiveness

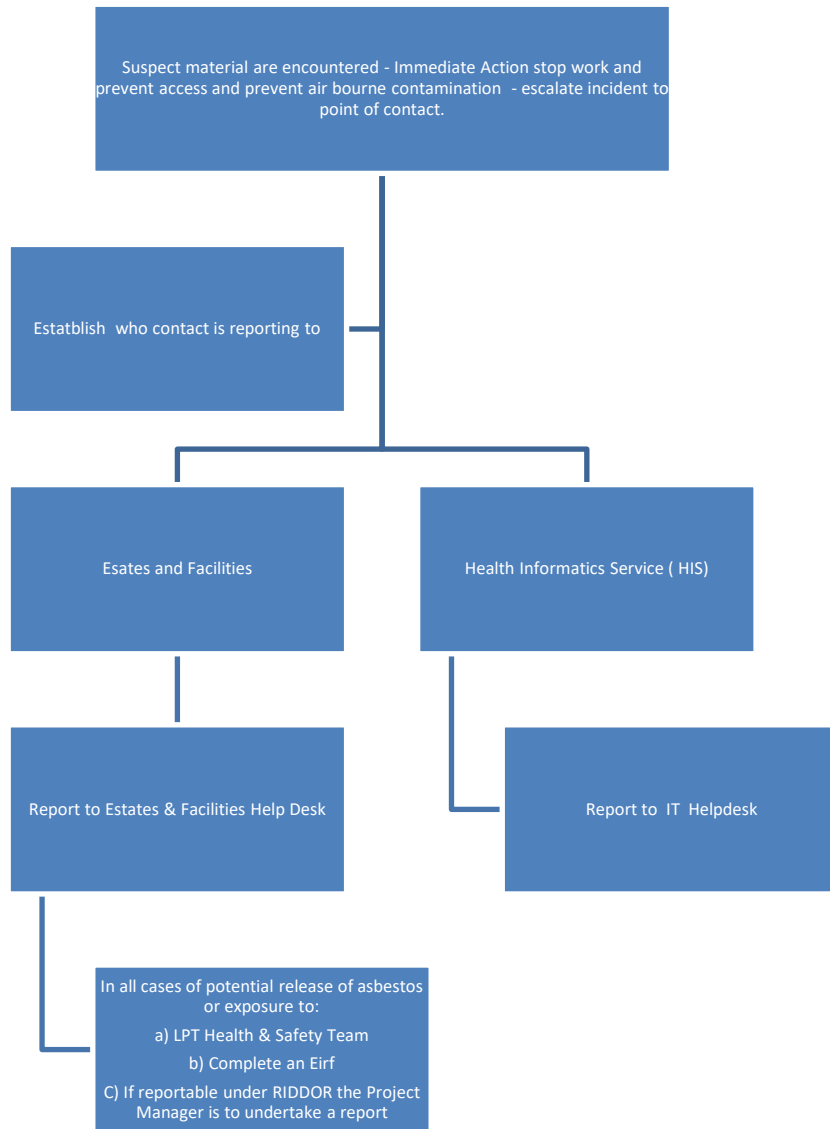
Page/Section	Minimum Requirements to monitor	Process for Monitoring	Responsible Individual /Group	Frequency of monitoring
12.1	Annual Re Inspections		Authorised Persons	Annual
12.2	Incident Reports	Review of incidents H&S Committee/EMEC	Health & Safety and Estates teams	Quarterly

## 14.0 References and Bibliography

The policy was drafted with reference to the following:

Control of Asbestos Regulations 2012  
HSG264 (Second edition) 2012  
Health and Safety at Work Act 1974  
The Control of Substances Hazardous to Health Regulations 2002 (COSHH)

# Appendix 1 Asbestos Management Action Card



## Appendix 2 Training Requirements

### Training Needs Analysis

<b>Training topic:</b>	Asbestos
Type of training: (see study leave policy)	<input type="checkbox"/> Mandatory (must be on mandatory training register) <input checked="" type="checkbox"/> <b>Role specific</b> <input type="checkbox"/> Personal development
Directorate to which the training is applicable:	<input type="checkbox"/> Mental Health <input type="checkbox"/> Community Health Services <input checked="" type="checkbox"/> <b>Enabling Services</b> <input type="checkbox"/> Families Young People Children / Learning Disability Services <input type="checkbox"/> Hosted Services
Staff groups who require the training:	Staff involved in the Maintenance, Testing and repair of Buildings. Estates Authorised Person, Estates Competent Persons
Regularity of Update requirement:	3 Yearly
Who is responsible for delivery of this training?	External Providers
Have resources been identified?	N/A
Has a training plan been agreed?	
Where will completion of this training be recorded?	<input checked="" type="checkbox"/> <b>ULearn</b> <input type="checkbox"/> Other (please specify)
How is this training going to be monitored?	

## Appendix 3 The NHS Constitution

- The NHS will provide a universal service for all based on clinical need, not ability to pay.
- The NHS will provide a comprehensive range of services.

Shape its services around the needs and preferences of individual patients, their families and their carers	✓
Respond to different needs of different sectors of the population	✓
Work continuously to improve quality services and to minimise errors	✓
Support and value its staff	✓
Work together with others to ensure a seamless service for patients	✓
Help keep people healthy and work to reduce health inequalities	✓
Respect the confidentiality of individual patients and provide open access to information about services, treatment and performance	✓



## Appendix 4 Due Regard Screening Template

<b>Section 1</b>			
Name of activity/proposal		Asbestos Management	
Date Screening commenced		October 2023	
Directorate / Service carrying out the assessment		Enabling	
Name and role of person undertaking this Due Regard (Equality Analysis)		R Brown	
Give an overview of the aims, objectives and purpose of the proposal: Update to existing policy			
AIMS: To provide assurance that Asbestos is managed in accordance with relevant regulations and guidance.			
OBJECTIVES: To ensure that staff involved in the operation, management and maintenance understand the purpose and procedures to follow.			
<b>Section 2</b>			
Protected Characteristic	If the proposal/s have a positive or negative impact please give brief details		
Age	Policy covers all age groups for who the Trust provides services for		
Disability	No negative impact		
Gender reassignment	No negative impact		
Marriage & Civil Partnership	No negative impact		
Pregnancy & Maternity	No negative impact		
Race	No negative impact		
Religion and Belief	No negative impact		
Sex	No negative impact		
Sexual Orientation	No negative impact		
Other equality groups?	No negative impact		
<b>Section 3</b>			
Does this activity propose major changes in terms of scale or significance for LPT? For example, is there a clear indication that, although the proposal is minor it is likely to have a major affect for people from an equality group/s? Please <u>tick</u> appropriate box below.			
Yes		<b>No ✓</b>	
High risk: Complete a full EIA starting click <a href="#">here</a> to proceed to Part B		<b>Low risk:</b> Go to Section 4.	
<b>Section 4</b>			
If this proposal is low risk please give evidence or justification for how you reached this decision:			
This Policy covers all services where the activity of bathing and showering may be supported i.e. community setting and inpatients. It specifies differences for community staff			
Signed by reviewer/assessor	Richard Brown	Date	Dec 2023
<i>Sign off that this proposal is low risk and does not require a full Equality Analysis</i>			
Head of Service Signed	Richard Brown	Date	Dec 2023

## Appendix 5 Data Privacy Impact Assessment Screening

<p>Data Privacy impact assessment (DPIAs) are a tool which can help organisations identify the most effective way to comply with their data protection obligations and meet Individual's expectations of privacy.</p> <p>The following screening questions will help the Trust determine if there are any privacy issues associated with the implementation of the Policy. Answering 'yes' to any of these questions is an indication that a DPIA may be a useful exercise. An explanation for the answers will assist with the determination as to whether a full DPIA is required which will require senior management support, at this stage the Head of Data Privacy must be involved.</p>		
<b>Name of Document:</b>	Asbestos Management Policy	
<b>Completed by:</b>		
<b>Job title</b>		<b>Date</b>
<b>Screening Questions</b>	<b>Yes / No</b>	<b>Explanatory Note</b>
1. Will the process described in the document involve the collection of new information about individuals? This is information in excess of what is required to carry out the process described within the document.	No	
2. Will the process described in the document compel individuals to provide information about them? This is information in excess of what is required to carry out the process described within the document.	No	
3. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information as part of the process described in this document?	No	
4. Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?	No	
5. Does the process outlined in this document involve the use of new technology which might be perceived as being privacy intrusive? For example, the use of biometrics.	No	
6. Will the process outlined in this document result in decisions being made or action taken against individuals in ways which can have a significant impact on them?	No	
7. As part of the process outlined in this document, is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For examples, health records, criminal records or other information that people would consider to be particularly private.	No	
8. Will the process require you to contact individuals in ways which they may find intrusive?	No	
<p><b>If the answer to any of these questions is 'Yes' please contact the Data Privacy Team via <a href="mailto:Lpt-dataprivacy@leicspart.secure.nhs.uk">Lpt-dataprivacy@leicspart.secure.nhs.uk</a></b>  <b>In this case, ratification of a procedural document will not take place until review by the Head of Data Privacy.</b></p>		
<b>Data Privacy approval name:</b>	Not required	
<b>Date of approval</b>		

Acknowledgement: This is based on the work of Princess Alexandra Hospital NHS Trust