Removing Asbestos from UK Buildings – The Need for a National Asbestos Strategy

Delivering an asbestos free UK by 2065

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Asbestos Information CIC

CONTENTS

SUMMARY

The Present Problem

- The UK has the highest asbestos-related death rates in the world, still the leading cause of workplace death.
- Exposure to asbestos is no longer limited to traditional industries and high-risk trades. It is affecting teachers, nurses, and office workers - with worrying cases emerging among younger people.
- Asbestos is a present danger in many buildings across the UK – not just our workplaces but our homes colleges and schools.
- Yet, we don't know where asbestos is, how much there is, or what condition it's in. No central register exists to store this information.
- The current policy to 'manage in situ' is flawed. This assumes asbestos is safe if left undisturbed, but asbestos is a friable material, degrading, and easily disturbed in ageing public buildings.
- The UK's public estate is crumbling. Schools and hospitals are riddled with asbestos; the HSE found a third of schools in breach of asbestos regulations in 2023.
- The 'Duty to Manage' is failing - 71% of surveyed buildings showed damaged asbestos, many deteriorated due to inaction or poor oversight.
- Many of the buildings constructed with asbestos are being used beyond their design life.
- Successive governments are in denial refusing to implement a removal strategy, leaving the public at daily risk.
- UK buildings are a ticking time bomb: Without a national plan for phased removal, asbestos exposure remains a lethal lottery across the UK.

The Need for Strategy

- The UK is falling behind other nations, such as Australia, the Netherlands and Poland that have acted decisively to remove asbestos.
- The international lessons of a data-driven approach and time-bound strategies are clear.
- Strategy should:
  - Prioritise the most dangerous forms of asbestos (like brown amosite) and high-risk sites (e.g. CLASP schools, older hospitals).
  - Phase removal over 40 years with clear milestones.
  - Align asbestos removal with wider infrastructure renewal.
  - Build public trust through transparency and accountability.

- Effective strategy can lower NHS costs, produce fewer compensation claims, provide better planning, deliver visible upgrades in schools, hospitals, and housing, resulting in safer buildings and a healthier, fairer society.

A Data-Driven Approach

- Government recognises data and AI as tools to transform services, cut costs, and improve accountability in many areas of public life.
- This approach has not been replicated to tackle the UK's asbestos legacy. Current management is fragmented, inconsistent, and lacks a central database.
- A national asbestos register was blocked by the previous government over cost and complexity concerns.
- Yet industry bodies have demonstrated feasibility. Asbestos Information CIC has shown existing data can be aggregated into a national register with 'proof of concept':
  - Largest-ever dataset: 400,000 properties, 7m+ data lines, 3m asbestos items.
  - Interactive mapping at constituency level to visualise risks.
  - Asbestos Information Certificate (AIC) - clear, colour-coded building certificates with QR links to full survey data.
- A Freedom of information request looking at the comparable cost of running the UK's energy performance certificate register underlines that costs of a national asbestos register are likely to be modest.
- A national database enables real-time monitoring, targeted inspections, resource allocation, and prioritised removal of high-risk asbestos.
- Data empowers government to hold HSE to account, and HSE to hold duty holders to account. What is not measured is not managed.
- AI and big-data tools (e.g. the Extract programme) show how legacy datasets can be unlocked and transformed into actionable insights.
- The bottom line: A central asbestos register is affordable, achievable, and essential to drive an effective national removal strategy.

Towards a National Strategy for Asbestos Removal

Government should establish a national taskforce to develop and deliver a comprehensive strategy for asbestos, focused on the following:

- **Build the evidence base** – Create a National Asbestos Register, pilot audits, and publish 5-year milestones to ensure transparency and accountability.
- **Show the economics** – Commission an independent cost–benefit analysis proving that phased removal saves lives, NHS costs, and compensation payouts.

- **Plan the removal** – Develop a national phased strategy: prioritise CLASP schools, NHS hospitals, MOD homes, and social housing, with a 40-year removal target.
- **Raise awareness & standards** – Launch public campaigns, mandate accreditation for surveys/removal, and invest in training a skilled asbestos workforce.
- **Fix the rules** – Review and strengthen CAR 2012 and HSE practices, correct flawed risk algorithms, recognise true asbestos death rates (~21,000/year), and introduce fiscal incentives to accelerate removal.
- **Endgame** – Commit to an Asbestos-Free UK by 2065 through data, accountability, and cross-sector action

1. THE PRESENT PROBLEM

The first step in tackling any problem is admitting that it exists - only then can we define it, gather the right evidence, and build real solutions.

Asbestos: The UK's Deadliest Workplace Killer - The UK has a long-standing asbestos problem. As a nation we have one of the highest rates of asbestos related deaths in the world. Exposure to asbestos remains the UK's no.1 cause of workplace death, accounting for thousands of lives every year from mesothelioma, asbestosis and other asbestos-related diseases.

A Clear and Present Danger - Far from being a declining problem, a legacy of our industrial past, asbestos remains a clear and present danger. Overall deaths are falling - but slowly and not at predicted rates - while exposure is no longer limited to traditional industries and high-risk trades. There is growing evidence that people who should not come into direct contact with asbestos - teachers, nurses, and white-collar workers - are increasingly affected. At present, education is not considered a high-risk industry for malignant mesothelioma.[1]

The Hidden Threat to Children and Young People - Due to the long latency period between initial exposure and the appearance of symptoms, which can range from 10 to 50 years, victims are typically diagnosed in later years of life. Yet, another aspect of the present problem is the worrying incidents of asbestos deaths among younger people. Children are known to be more at risk than adults of developing mesothelioma.[2] Despite this, there is no official research about exposure among pupils and rates of mesothelioma in later life.

Asbestos in Homes, Schools, and Public Buildings - These factors suggest that people are being exposed over longer periods to lower environmental levels of asbestos in buildings – not just in their place of work but in their homes, at school, college, hospitals and the buildings which they need to use as part of daily life. Professor John Cherrie recently said that the risks to the occupants of buildings containing asbestos are fifteen times greater than the risks to maintenance workers.[3] All forms of asbestos were banned in the UK over 25 years ago. Buildings constructed since then will not contain this material, although many older buildings in the UK still do including domestic premises which are not covered by existing asbestos regulations.

What We Don't Know: Data Gaps and Missing Records – Yet, despite the risks, little is known about the presence of asbestos. We don't know where it is, and we don't know how much there is of it. Nor can we say with any confidence what condition it is in. The Health and Safety Executive (HSE) does not keep a record of asbestos in UK buildings. This 'duty' is passed onto those responsible for buildings, namely owners and leaseholders, who are

[1] Mesothelioma and Education Workers (MEWS): experiences of presentation, diagnosis, treatment and care. | MURC | The University of Sheffield

[2] Children who have been exposed to asbestos are nine times more likely to die from an asbestos related disease than adults who have been exposed later in life.

[3] Presentation at the BOHS FAAM Conference 2025

required to identify, maintain or repair asbestos in non-domestic premises. The information is dispersed and unaccounted for by any central operating mind – with no quality controls or standardisation in place. Further, there is no requirement for landlords of rented accommodation to either identify or maintain asbestos under the current regulations. The duty to manage only extends to shared spaces in domestic premises.

The Flaws of 'Management in Situ' - In addition, the current regulations for the management of asbestos directs duty holders to leave asbestos 'in-situ'. The assumption being that asbestos is safe as long as it is undisturbed. Yet asbestos is a friable substance that can easily be disturbed, especially when it forms part of the fabric of buildings such as system-built structures, like CLASP schools. But while it is easy to disturb it is not so easy to detect once microscopic fibres are released into the air.

Degrading Asbestos Materials, Crumbling Infrastructure, Growing Risks - All asbestos has a limited lifespan[4] and is degrading. UK amphibole imports ceased in 1983 and declined sharply in the preceding few years. Similarly, chrysotile was banned in 1999. All amphibole products are more than forty years old with the vast majority being more than fifty years old. These materials are in a state of disrepair beyond their planned lifespan. It is a similar story with chrysotile. For example, an asbestos cement roof put up in 1995 is now thirty years into its forty-year lifespan.

Our public estate is also falling into disrepair. As the Chancellor, Rachel Reeves, stated at the launch of the Government's 10-year infrastructure strategy, "Crumbling public buildings are a sign of the decay that has seeped into our everyday lives because of a total failure to plan and invest."[5] This speaks to a broad challenge facing the UK: the dilapidated state of our infrastructure, including schools and hospitals that are riddled with asbestos and which continue to present a lethal threat to all those who use them.[6] Maintenance backlogs across key public services are estimated to be at least £49 billion – though due to "poor government data"[7] the cost cannot be estimated and are likely to be higher.

Evidence of Widespread Non-Compliance - In 2022 an industry study examined asbestos in almost 130,000 buildings across the UK and found that 71 per cent had some level of damaged asbestos.[8] The analysis also shows that a proportion of the sample data had been subject to re-inspection. Either these items were in good condition at the time of the original survey and had since deteriorated, or the duty holder had failed to undertake any action.

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[4] Asbestos lifespan | Victoria Asbestos Eradication Agency

[5] Decade long Infrastructure Strategy to deliver stability, investment and national renewal - GOV.UK

[6] Numerous 'Freedom of Information' requests, estimate that asbestos is present in over 80% of schools and 90% of hospitals.

[7] National Audit Office (2025) Government building maintenance backlog is at least £49 billion, spending watchdog says

[8] Review of UK asbestos management 2022, Asbestos Testing and Consultancy (ATaC) and the National Organisation of Asbestos Consultants (NORAC) https://norac.org.uk/wp-content/uploads/2022/11/ATAC_NORAC_Asbestos_Report.pdf

In 2023, the Health and Safety Executive (HSE) conducted a sample of 400 school inspections.[9] This found that one-third of schools were in material breach of the Control of Asbestos Regulations - 7% of schools breached the regulations with enough severity for an enforcement notice to be served. If this data was extrapolated to all schools in England, this would represent over 1,000 schools with poor asbestos management practices requiring formal intervention.[10]

Failure of Oversight and Policy - Industry experts know that asbestos is not being effectively managed by duty holders and that the HSE's arm's length approach is not effective. Management in-situ is a complete failure of government policy. It has not demonstrably lowered risk and is not sufficient to meet future challenges.

A Ticking Time Bomb - We have an unknown number of buildings in the UK containing asbestos and no policy or plan to remove it. These buildings are ticking time bombs, and it is nothing short of a lottery as to who might be exposed to the asbestos contained within them, or when and where this might happen.

The UK has an asbestos problem, one which successive governments have been in denial about for decades. It is time to finally implement a strategy and plan for the phased removal of asbestos from all buildings.

[9] Schools asbestos inspection programme, 2023. https://www.hse.gov.uk/education/asbestos.htm
[10] Asbestos in schools: we need urgent action now to protect teachers and pupils | British Safety Council

2. WHY WE NEED A STRATEGY

Without a strategy, the UK is effectively gambling with public health. These are not hypothetical risks but lived realities, with lives cut short decades after exposure.

International Lessons

The UK is not alone in facing an asbestos legacy, but it is increasingly isolated in its lack of a coherent response.

- **Australia**: After banning asbestos in 2003, Australia created a National Strategic Plan for Asbestos Awareness and Management (2013–2023), now in its third phase – which will run from 2024-2030. This framework has established a national asbestos register, prioritised removal from schools and hospitals, and embedded awareness campaigns across workplaces and communities. The plan has been delivered on time and within budget, providing a clear model of how national coordination can drive progress.
- **The Netherlands:** The Dutch government committed to removing all asbestos roofing by 2024, with financial support packages to help homeowners and local authorities meet the target. This ambitious approach framed asbestos not just as a workplace hazard but as a broader environmental and social issue requiring systemic response.
- **Belgium:** In Flanders, the government adopted an Asbestos Abatement Action Plan in 2018, aiming for an “asbestos-safe” region by 2040. The plan is structured in phased intervals. All at-risk buildings must be inventoried with removal obligations to follow. Roofs and facades targeted by 2034, and other deteriorated asbestos elements removed by 2040. Public buildings already face mandatory removal deadlines, with private buildings incentivised under regulatory and financial measures
- **Poland and Nordic countries**: Several EU states have integrated asbestos removal into their broader infrastructure renewal and energy efficiency programmes, ensuring that when public buildings are renovated, asbestos is systematically removed. This lowers costs, avoids duplication of work, and accelerates the transition to safer environments.

These examples show that systematic, data-driven, time-bound strategies are not only feasible but effective. The UK, by contrast, still lacks a national register, a removal timetable, or a clear funding mechanism.

The Case for Strategy

A national strategy for asbestos removal is not about panic removal but about prioritised, phased, and costed removal. The science is clear: some asbestos types (e.g. brown amosite) are significantly more dangerous than others, while children’s vulnerability is significantly higher than adults’. The demographics of asbestos materials also matter—many installations are now past their designed lifespan, making degradation inevitable over the next two decades.

A strategic plan would allow government to:

- Identify and prioritise high-risk sites such as CLASP schools and older hospitals.
- Phase removal over 40 years, aligning with the Work and Pensions Select Committee's recommendations.
- Integrate asbestos removal with wider infrastructure renewal, reducing costs and disruption.
- Improve public confidence by setting milestones, publishing progress, and ensuring accountability.

Beyond Health and Safety

The need for a strategy is not just about avoiding deaths—though that is imperative. It is also about economics, efficiency, and justice. Without a plan, the UK faces mounting compensation claims, increased NHS costs, and the loss of productive lives. By contrast, a coherent national approach would:

- Provide certainty for asbestos removal by an accredited workforce.
- Enable more efficient public works planning by replacing unknown liabilities with costed, time-bound programmes.
- Deliver visible improvements in schools, hospitals, and housing, boosting public trust in government investment.
- Fulfil long-standing demands of trade unions, campaigners, and victims' families for a safe path to an asbestos-free future.

A Moral Imperative

The UK cannot continue to manage asbestos passively while buildings degrade and exposures continue. A phased, national strategy for asbestos removal —anchored in data, prioritisation, and accountability—is the only credible path forward. Without it, asbestos will remain a lethal legacy, silently claiming thousands of lives each year. With it, the UK can deliver not only safer buildings but a fairer, healthier, and more confident society—just as other nations have shown is possible.

3. A DATA-DRIVEN APPROACH TO ASBESTOS MANAGEMENT

In an era defined by rapid technological advancement, the power of data is revolutionising the way we confront some of the world's most persistent and complex challenges. It was described by the former Chief Data Officer for UK Government as "HMG's most underutilised and highly valued assets with the power to transform our public services, unlock cross government efficiencies, and boost the UK economy."[11]

The Labour Government has strongly supported this thinking and has pledged to use data, new AI and digital tools to reform public services. Earlier this year, during London Tech Week, the Prime Minister, Sir Keir Starmer, emphasised this stating that the UK must "harness this unprecedented opportunity and use it to improve the lives of working people."[12]

This national vision for data and AI is especially relevant to the challenge of asbestos management—a problem that has long been hampered by fragmented information, inconsistent practices, and the sheer scale of legacy asbestos in UK buildings.

The Work and Pensions Select Committee report on Asbestos Management (2022) recommended a national database to record all asbestos in public buildings, including location, type, quantity, and levels of risk presented. It argued for a data-driven approach to managing asbestos in buildings, similar to the approach taken in other countries.

However, the previous Conservative government rejected this proposal, stating that a central register would be (a) too difficult to develop, (b) incur significant costs and (C) lead to unnecessary work and duplication. A national strategy for asbestos must overcome these objections and demonstrate the efficacy of such a system.

Overcoming Difficulty - Gathering the UK's Asbestos Data

Fortunately, the foundational information for an asbestos database already exists. Under the Control of Asbestos Regulations 2012, owners and those responsible for managing non-domestic premises (the "duty holders") are legally required to identify, manage, and keep records of asbestos in their buildings. This usually means commissioning an asbestos management survey to locate asbestos-containing materials (ACMs) and assess their condition.

Most of this asbestos data is now held within a small number of commercial databases. Due to technological advances, it is possible for these datasets to brought together, to create a central asbestos register. There are issues to be resolved, such as standardising formats for the collection, storage and sharing of data, but development work undertaken by Asbestos Information CIC has already proven the feasibility of this concept.[13]

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[11] Activating data for national benefit and transformed public services – Government Digital and Data
[12] Prime Minister's remarks at London Tech Week 2025: Monday 9 June - GOV.UK
[13] https://asbestosinformation.org.uk/

- **Massive data collection:** Through collaboration with UKAS-accredited asbestos consultancies, Asbestos Information CIC has collated and analysed survey data from nearly 400,000 properties, comprising over 7 million data lines and identifying almost 3 million asbestos items - making it the single largest dataset of its kind in the UK.
- **Interactive mapping for visibility:** The data has been transformed into an interactive map, visually overlaying asbestos prevalence, at constituency level. This demonstrates the facility to identify the geographical concentration of asbestos. Links to Ordinance Survey mapping are being explored and will further enhance pinpoint location of buildings containing asbestos and ensuring data from all buildings is captured.
- **Asbestos Information Certificate (AIC):** The development of an innovative Asbestos Information Certificate, akin to an Energy Performance Certificate, provides a simplified, standardised, colour-coded summary of asbestos condition and management in a property. Each certificate, which could be displayed in buildings, includes a QR code linking back to full survey data—designed to be both intuitive and actionable by owners, managers, and contractors.

Achievement to date	Description
Data aggregation	Largest-ever dataset mapping asbestos across the UK.
Visualisation tools	Interactive maps highlighting risks.
Standardised reporting (AIC)	Easy-to-read certificate with QR access to full survey data.
Implementation plan	Five-phase pathway toward a real, centralised register.
Industry engagement	Strategy formally launched and backed by industry professionals.

In short, Asbestos Information CIC has not just proposed the idea of a national register—they have built the technical model, validated it with data, and laid out a clear, staged plan to make it a reality.

Costs should not be a barrier

In a response to a recent Freedom of Information request, the Ministry of Housing, Communities and Local Government (MHCLG) has disclosed the costs of setting up and operating the UK's Energy Performance Certificate, which records the energy efficiency rating of all domestic and commercial premises in the UK. This includes:

- Development costs for the register of around **£2.5 million**. This figure includes salaries for civil servants and contracted developers, as well as non-staff costs such as hosting, software, and service desk provision for the first 18 months of its operation in MHCLG.
- Annual operating cost in 2024/25 of about **£1.4 million**. This covers technical and operational staff, IT infrastructure, and administrative functions, and is fully funded by lodgement fees (£1.50 for domestic EPCs and £1.70 for non-domestic).

- Technical maintenance for the same year cost **£945,000** – £720,000 for technical staff and £225,000 for hosting, software, accessibility, and cyber-security.
- Seventeen staff currently support the register's operations, with total staffing costs of **£1.1 million** in 2024–25. These staff also maintain the national list of accredited EPC assessors.

The state can afford the relatively modest costs of a register to record and track the energy efficiency of buildings. A comparable database, to record the presence of deadly asbestos, should not be prohibitively expensive.

Efficacy of data

The rationale for a national database is simple. Asbestos records can be collated and held centrally by the HSE to enable data sharing and oversight – so that the overall condition of asbestos in buildings can be usefully updated, analysed and monitored in real time. Accurate data is understood as a vital component in the ongoing management of asbestos as well as a strategic tool to help identify and prioritise the removal of asbestos from high-risk buildings.

A database does not involve necessary duplication of data collection or processing. Once established, the automation of existing survey data will enable a level of analysis which is currently not possible. With such a system, the UK government would be better able to hold HSE to account and HSE would be able to hold duty holders to account. "What is not measured is not managed" as the saying goes.

Data is the fundamental prerequisite upon which asbestos management in buildings should be based. A national register of asbestos materials is fundamental to understanding the scale of the challenge at the national level, enabling the HSE to hone inspections, to drill down into the extent and condition of materials, to set budgets, allocate resources and to establish timeframes. Data enables a plan – and without seeking it, government is failing in its remit to tackle the issue.

Technology can improve accountability of the regulator through transparent reporting and risk reduction. It can enable government to better scrutinise the work of the HSE and other government departments, such as DfE. It can also help reduce cost and increase efficiency. By leveraging advanced data collection and AI-powered analysis, the government can fundamentally change its approach to understanding and addressing the UK's asbestos problem. The Extract programme, operated by the Ministry of Housing, Communities & Local Government (MHCLG), provides a relevant example of how AI and data-driven tools can unlock legacy information at scale, offering a model for how a national asbestos register could be created from existing fragmented datasets.[14]

[14] https://ai.gov.uk/projects/extract/

Case Study: Extract – Unlocking Historic Planning Data

The Challenge - Vast amounts of historic UK planning data were locked in scanned documents and unstructured formats, making it costly, time-consuming, and inconsistent to process. This slowed down housing and infrastructure decisions and wasted public resources.

The Innovation - The Extract tool, developed by the Ministry of Housing, Communities & Local Government (MHCLG) Digital Team, uses AI to read, interpret, and categorise decades-old planning records. It digitises text and geospatial data, making information searchable, structured, and actionable.

The Impact – The programme has reduced document processing from hours to minutes, saved an estimated 250,000 manual work hours and £527 million annually across England, improved transparency, consistency, and efficiency in planning decisions, freed planners to focus on complex cases rather than admin tasks.

Next Steps - Following successful pilots in several councils, Extract is set to expand its capabilities to process more data sources, integrate with live planning systems, and develop predictive analytics to support the government's housing and infrastructure goals.

A regulator fit for purpose

Regulations for the management of asbestos are currently limited to non-domestic premises and the health and safety of workers who are expected to come into direct contact with asbestos (e.g. construction and wider trade occupations). This means that the remit for the HSE does not include the health and safety of a large proportion of the population that might be exposed in premises other than their workplace.

It is clear that this situation must be reformed. Regulations must be updated to include domestic premises, beginning with social and private landlords, while there is a compelling argument for an **independent asbestos regulator** that can focus on the asbestos risk – beyond the workplace.

The UK's approach to managing asbestos lags behind the best international practice. A world leading 21st century regulator should embrace new technologies and 'big data' to more effectively understand and respond to the risks which asbestos presents to the general public.

4. BUILDING TOWARDS A NATIONAL STRATEGY

In February this year, Sarah Albon, Chief Executive of the HSE, gave evidence to the Work & Pensions Select Committee, stating that there is now "agreement between HSE and government to ultimately look to remove asbestos entirely from the built environment". The acknowledgement is there; what is missing is a timeframe and a plan.[15]

During a subsequent Westminster Hall debate the Minister, Sir Stephen Timms, reiterated the need for better data and long-term planning for removal.[16] He stated his support for creating a national digital register of workplace asbestos, bringing together existing records held by duty holders. As a possible first step, he suggested a **one-off asbestos census** - starting with government-owned buildings such as schools and hospitals - to build a reliable evidence base for future removal strategies. How such a census would be undertaken is not clear. It implies the analogue collection of data, which has already been captured in existing asbestos surveys.

The most obvious thing that Government should do is adopt the full recommendations of the Work and Pension Select Committee Inquiry into Asbestos Management (2022-23) and develop a national strategy for the phased removal of asbestos.

To achieve this, we are calling on the government to establish a national taskforce to develop and deliver a comprehensive strategy for asbestos, including its phased removal from UK buildings.

Strand 1: Establish the evidence base for asbestos in buildings

The strategy should firstly establish the evidence base to understand the asbestos legacy in our homes, workplaces and the wider built environment.

Government should support the creation of a **national asbestos register**. Neither cost nor technical difficulty should be cited as a barrier to achieving this objective. A digital register would demonstrate the value of collecting asbestos data and enable the implementation of an Asbestos Information Certificate for all buildings containing asbestos.

Government should **pilot a place-based audit** of public buildings in a specific area, local authority or constituency, to provide the blueprint for subsequent national roll-out.

Government should support and **work with accredited asbestos consultancies to co-create** this development. In doing so government should facilitate engagement with the Extract team and civil servants leading on the use of big data and AI within Government to create opportunities for shared learning.

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[15] Parliament Live (minutes 11:12 - 11:16)
[16] Westminster Hall Debate, Asbestos Removal: Non-Domestic Buildings https://hansard.parliament.uk/commons/2025-06-18/debates/64452B48-07E1-4ACF-83B4-21BC1AE7A412/AsbestosRemovalNon-DomesticBuildings

Government should publish 5-Year Strategic Milestones and use the National Asbestos Database to set departmental targets for the management and removal of asbestos, and enable accountability.

Strand 2: Economic Analysis of Asbestos Management and Removal

This strand should establish the costs and benefits of removing asbestos from all buildings. This would replace the unknown liability of asbestos within public buildings with known quantities and associated costs.

Government should undertake an **independent economic assessment** of the costs and benefits of a phased removal programme for asbestos. This would consider a robust estimate of the number of buildings containing asbestos, identified in strand 1.

The economic assessment should compare the **costs and benefits** associated with the phased removal of asbestos from non-domestic properties, according to identified risks and priorities, with a situation where all asbestos materials are completely removed from the built environment – including homes. The impact of the options should consider the costs of removal, the costs of demolition and rebuilding (e.g. in the case of CLASP schools) and the costs of investment in disposal facilities. It should also consider **savings to the state** in terms of NHS treatment and compensation for all affected people, as well as the impact on human health and economic activity to businesses and workers.

This analysis should present the **options** to be considered and result in a **costed plan for the phased removal** of asbestos from buildings.

Strand 3: Plan for phased removal

Government should **agree a national plan** to facilitate safe, proactive removal and disposal. This plan should be **developed in consultation** with a wide range of stakeholders, including all levels of government, unions, industry and asbestos support groups.

Market forces and material demographics of asbestos materials will ensure that some of it will be removed in the next twenty years without the need for government intervention. A significant percentage of the total imported asbestos comprised asbestos cement cladding which is now at the end of its lifespan. National figures for asbestos materials coverage, will therefore decline. However, the number of notifications for licensed work is falling, while asbestos consultants are seeing materials left in situ and asbestos budgets are all being reduced. Based on Asbestos CIC's estimate of 150 million asbestos items the UK would need to remove 7,500,000 items per year or 20,500 per day over a 40-year period.

The plan for phased removal should **prioritise higher-risk asbestos materials**. All asbestos is dangerous: there is no debate about this. However, there is a strong case to prioritise the removal of amphiboles. According to an important recent study, "Chrysotile constituted 88% of UK asbestos imports... but only 2% of asbestos fibres in the lungs of men with

mesothelioma or lung cancer, born 1940–64".[17] By prioritising the removal of 12% of UK asbestos, the risk profile of the remaining 88% would be drastically reduced.

This plan should **target specific structures** (e.g. CLASP schools, MOD homes or NHS hospitals) which are known to contain higher risk asbestos and where building programmes are looking to replace or renovate existing structures – in the school or NHS estate.

The presence of asbestos and the requirement to remove it should be **a key criterion in capital investment programmes**, when assessing and selecting buildings for refurbishment and/or net-zero compliance.

The government should commit to national targets, including the 40-year timeframe set by the Work and Pensions Select Committee. This should include:

- A 10-year plan for the prioritised replacement of system built (e.g. CLASP) schools
- A 15-year plan of asbestos removal within social housing.

Strand 4: Increase public awareness and improve standards

A National Strategy for Asbestos Removal should consider broader issues and incorporate policies to improve:

- Awareness among the general public about the dangers of asbestos in buildings and support the care for patients in the short to long term.
- Safety standards across the asbestos industry – beginning with mandatory accreditation for licensed asbestos surveys and removal, and
- Training standards to include the requirement for continued professional development.

Government should **support workforce development needs** to meet the requirements of a national removal programme, working with industry to provide career transparency and longevity to trainees, recruits and those currently in the industry. In turn employers should commit to increasing skilled technical employment by investing in employee training, recruitment and retention.

Strand 5: Enhanced regulatory frameworks and incentive programs

Government should undertake **a comprehensive review** of existing asbestos regulations, including the Control of Asbestos Regulations 2012 (CAR 2012) and the ongoing role of the Health and Safety Executive (HSE). Current rules focus primarily on non-domestic buildings and occupational exposure, but they fail to address hazards in the home or the

[17] Gilham C, Rake C, Hodgson J, Darnton A, Burdett G, Peto Wild J, Newton M, Nicholson AG, Davidson L, Shires M, Treasure T, Peto J; TIPS Collaboration. Past and current asbestos exposure and future mesothelioma risks in Britain: The Inhaled Particles Study (TIPS). Int J Epidemiol. 2018 Dec 1;47(6):1745-1756. doi: 10.1093/ije/dyx276. PMID: 29534192; PMCID: PMC6280925

responsibilities of landlords. This gap suggests that a new, more inclusive regulatory approach is required.

The review should also assess the accuracy of current risk assessment methods and identify evidence gaps that limit effective policymaking.

The complex algorithm currently used to assess **asbestos risk is fundamentally flawed** and dangerously misleading. Correcting it would be essential to informing a credible national asbestos strategy. HSE research shows that amosite (brown asbestos) is up to 100 times more dangerous than chrysotile (white asbestos). [18] Yet the official algorithm scores amosite as only three times riskier.[19] This underestimation makes environments such as CLASP primary schools appear less hazardous than they are, when in fact they should be considered a top priority for action.

Additionally, significant **research gaps remain in the evidence base**, including:

- Risks to children and young people.
- Exposure in social housing.
- Accurate recording of asbestos-related deaths.

Officially there are around 5,000 asbestos-related deaths (ARDs) annually, half of them from mesothelioma. But these **records are an underestimate**. The HSE assumes a 1:1 ratio between mesothelioma deaths and other Asbestos Related Diseases. HSE's own scientists, in line with international research, suggest the ratio is closer to 1:8.[20] If correct, the true number of asbestos deaths in the UK could be closer to 21,000 per year.

This underreporting distorts government policy by underestimating the health and financial costs of asbestos. When viewed against the £14 billion provision for recent compensation scandals, the long-term fiscal burden of asbestos deaths could be far greater.

There are additional **concerns about how asbestos-related occupational deaths are recorded** and analysed. HSE excludes deaths of individuals over 75 from official occupational figures. Yet most mesothelioma deaths occur after this age, meaning the data systematically underreports fatalities. Occupations are also misclassified – death certificates record the last known occupation, which may not reflect lifetime exposure. Teachers who retired early or changed careers, for example, are underrepresented in the data.

It has also been argued that **statistical methods to assess occupational deaths are flawed**– HSE uses Proportional Mortality Ratios (PMRs), comparing deaths across all occupations.

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[18] Hodgson and Darnton Ann. Occup. Hyg., Vol. 44, No. 8, pp. 565–601, 2000 The quantitative risks of mesothelioma and lung cancer in relation to asbestos exposure

[19] HSE (2012), HSG264 - Asbestos: The Survey guide, p.67

[20] Darnton, L, (2023), "Quantitative assessment of mesothelioma and lung cancer risk based on Phase Contrast Microscopy (PCM) estimates of fibre exposure: an update of 2000 asbestos cohort data", Environmental Research, Vol 230

Because male-dominated, historically high-risk industries (shipbuilding, construction) skew the baseline, the risks to female teachers, nurses, and assistants are understated.

Evidence submitted to the Work & Pensions Committee by Robin Howie shows that mesothelioma deaths among female teachers, nurses, and care staff are significantly higher than among the female population as a whole. This indicates a far greater occupational risk than HSE currently recognises.

To accelerate removal, government should **explore fiscal and policy incentives**, such as:

- Treating asbestos liabilities as a public fiscal liability within taxation policy.
- Developing further financial or regulatory incentives to encourage early removal of high-risk materials.

Through improved data, risk assessment, and accountability, a National Strategy for Asbestos Removal can deliver long-term, cross-sector renewal. By prioritising the removal of the most dangerous materials and supporting coordinated action, the UK can commit to the ultimate goal of an Asbestos-Free UK by 2065.

National Strategy for Asbestos Removal – Action Plan Summary

Strand	Focus	Key Actions	Outcomes
1. Establish the evidence base	Build a national picture of asbestos in buildings	• Create a **National Asbestos Register** and **Asbestos Information Certificate** system • Pilot place-based audits of public buildings • Collaborate with accredited asbestos consultancies, the Extract team, and civil servants • Publish 5-year milestones and departmental targets	Transparency, accountability, and reliable data for future removal programmes
2. Economic analysis	Assess costs and benefits of asbestos removal	• Commission an **independent economic assessment**- • Compare phased vs. complete removal (including homes) • Factor in removal, demolition/rebuilding, disposal facilities- • Include NHS costs, compensation, and productivity impacts	Costed plan that demonstrates the financial and health benefits of phased removal
3. Plan for phased removal	National removal and disposal strategy	• Agree a cross-sector national plan with unions, industry, and support groups • Prioritise **high-risk materials** (e.g. amphiboles)- Target specific structures (CLASP schools, MOD housing, NHS hospitals)- Link asbestos removal to capital programmes and net-zero upgrades- Commit to national targets: 10-year plan for CLASP schools, 15-year plan for social housing, 40-year full removal	Safer schools, homes, and public buildings; phased elimination of asbestos

4. Public awareness & standards	Improve understanding and industry standards	• Raise **public awareness** of asbestos dangers • Mandatory accreditation for surveys/removal • Strengthen training and CPD requirements • Support workforce development and career pathways • Employers to invest in skills, recruitment, and retention	Better-informed public, safer industry practices, skilled workforce for national programme
5. Regulatory frameworks & incentives	Strengthen regulations and create incentives	• Review **CAR 2012** and HSE's role. • Address evidence gaps: homes, landlords, children's vulnerability, social housing • Correct flawed risk algorithms • Recognise true asbestos deaths • Fix occupational death recording and PMR methodology • Create fiscal/tax incentives to encourage early removal	Robust, evidence-led regulations; incentives for proactive removal; clear path to an **Asbestos-Free UK by 2065**