Reinforced Autoclaved Aerated Concrete (RAAC) - Frequently Asked Questions – September 2023

The safety of patients, staff and visitors is our priority and while there is no immediate risk to the buildings the organisation will take proactive action to ensure appropriate mitigation and control measures are in place to allow the effective record and identification, risk management and monitoring of RAAC planks identified across the board wide estate.

• Q1. What is Reinforced Autoclaved Aerated Concrete (RAAC)?

RAAC is a lightweight form of concrete used mainly in roof, floor and wall construction in the UK from the mid-1950s to the mid-1990s. It has been found in a range of buildings, both public and private sector.



• Q2. What is the main concern related to RAAC now?

RAAC has proven to be not as durable as other concrete building materials and prone to degradation over time due to external factors. There is a risk it can fail, particularly if it has been damaged by water or not formed correctly when originally fabricated.

• Q3. Can RAAC planks fail without warning?

If overloaded, or unmaintained, all structural have the potential to fail, irrespective of RAAC. Engineers during the 1960s to the early 1990s designed RAAC structures with safety in mind for "ductile" a slow and controlled failure and not a sudden failure.

• Q4. Is there RAAC present in NHS Ayrshire & Arran buildings?

Given how popular it was in construction, it was highly likely we have buildings including RAAC. Of our total estate, we identified 3 buildings, or parts of buildings, which contain RAAC (eg Siparex). These buildings have been identified solely because of when they were built, design and construction type; their age means it is more likely that RAAC was used in their construction. This process continues to take place in all health boards in Scotland.

• Q5. Which buildings have been identified?

Survey inspections across the board wide estate have identified Reinforced Autoclaved Aerated Concrete (RAAC) within the following locations;

- University Hospital Crosshouse Main Boilerhouse.
- University Hospital Crosshouse Low rise.
- University Hospital Crosshouse Lister Centre.

No other locations of RAAC construction have been found to date.

The following link provides a list of properties to be surveyed across the NHSScotland Estate, including NHS Ayrshire and Arran buildings.

RAAC -List of Properties v1 Jul 23 (nhs.scot)

• Q6. What is the condition of RAAC identified?

At present the RAAC planks found were not generally distressed, nor did they appear to have deflected excessively.

• Q7. What happens next?

Structural assessments have been conducted across the estate by suitably qualified and experienced engineers as part of a national standardised approach being coordinated by NHS Scotland Assure.

When we have more details about the timeline for these surveys, we will share them.

• Q8. What is the governance overseeing RAAC?

The following groups have oversight on the NHSScotland national survey programme being coordinated by NHS Scotland Assure;

NHSScotland RAAC Steering Group RAAC Cross Sector Working Group National Infrastructure Board (NIB) National Strategic Facilities Group (NSFG) Scottish Property Advisory Group (SPAG)

• Q9. Is this an Ayrshire & Arran only issue?

No. The NHS Scotland estate is being surveyed to see if RAAC is present. Currently 75 surveys have been completed across NHS Grampian, NHS Ayrshire & Arran and NHS Fife.

• Q10. Are there plans to close any of the buildings on the list?

No. Following completion of the detailed surveys a comprehensive risk assessment and recommendations, we will be in a better position to make any decisions on any future actions, requirements and investment needed to support.

• Q11. What should I do if I am based in one of the buildings on the list?

Please continue to go about your work duties as usual, reporting any estates or maintenance issues as you normally would through the helpdesk reporting system.

• Q12. Does RAAC pose a health risk?

No. The concerns about RAAC are solely linked to its durability. There is no evidence to suggest it poses a health risk.

• Q13. Do we need to vacate our building/area during the specialist survey?

No. The survey process will require access into ceiling voids, to allow the surveyors to carry out visual inspections. We expect any disruption will be minimal. It may be the case that, before the specialist surveys begin, our local teams will carry out preliminary checks and an asbestos inspection, if required. Areas will be informed directly what work is required.

• Q14. What happens after the surveys take place?

As noted above, the initial survey shouldn't present you with any major issues. If the surveyors confirm RAAC is **not** present, then there will be no further action for you.

If they find RAAC is present, they will make a second visit. These may be more disruptive, but we do not expect they will require you to vacate buildings. The second survey will establish whether the RAAC is in good condition, and therefore no action required, if it requires regular inspections but can be left in place, or if significant work is required.

• Q15. What contingency plans do we need to make?

All services should have robust Business Continuity Plans, which cover what you would do in the event of significant disruption. We would encourage everyone – but especially teams based in the areas to be inspected – to review their Business Continuity Plans.

You should think about what your options are **if** significant work is required, and you have to vacate your area. We must stress, we hope this will **not** be the case for most of you, but it is better to be prepared.

• Q16. What are the likely financial implications?

At this stage, we do not know and will not know until the surveys are complete. This is a national survey programme; we await further guidance nationally.

• Q17. What will the focus area of the surveys be?

The detailed surveys will focus on the roof and walls of a building, as this was the part of a building where RAAC was most used. If RAAC is not found in the roof, it is highly unlikely it is present anywhere else in the building and there will be no further action taken.

• Q18. When did this problem first come to light?

The first issues reported with RAAC related to an incident at a school in England in 2018 which resulted in a Safety Alert being issued by National Services Scotland.

SAN2302 (nhs.scot)

• Q19. The building/area I work in is not on the list for RAAC surveys; do I need to do anything further?

As regards RAAC, no you do not. However, we would encourage everyone to monitor the buildings they are working in and report any issues via the Estates Helpdesk, without delay. Early resolution of any building problems will keep you and your working environment as safe as possible.

Please also be assured that NHSAA remains committed to continue to work closely with NHS Scotland Assure and will follow their survey partner's independent structural engineering recommendations related to remediation and the effective management of areas of known RAAC within our buildings and in order to continue to deliver a safe service for patients.