

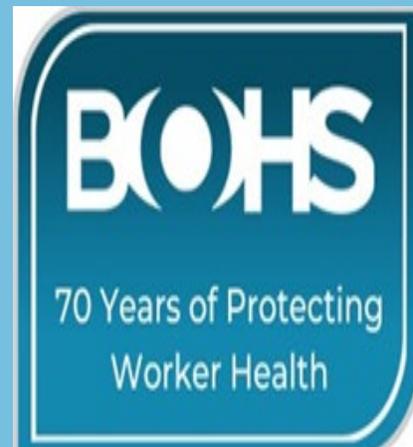
OCCUPATIONAL HYGIENE

PAST

PRESENT

FUTURE

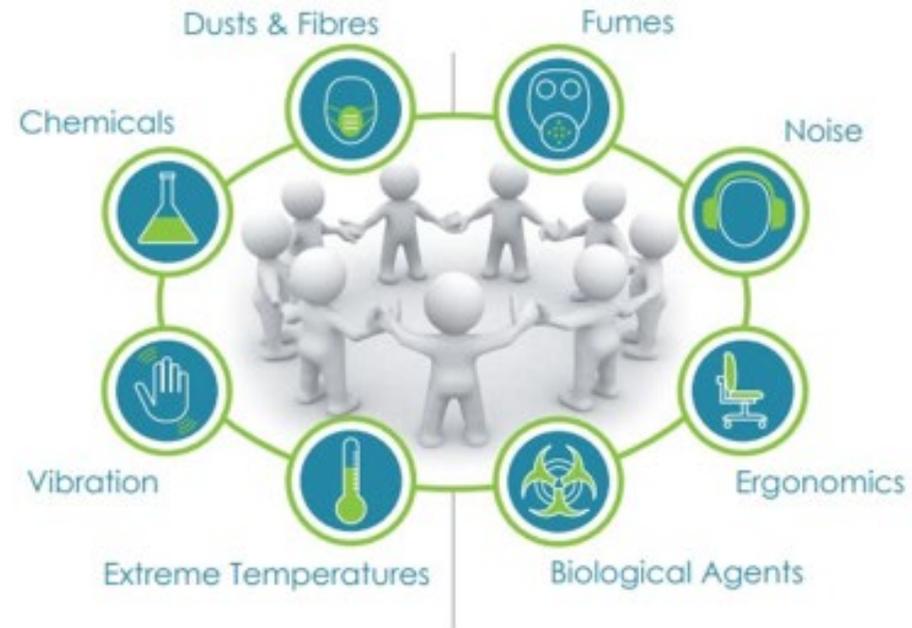
CHALLENGES



OCCUPATIONAL HYGIENE PAST FUTURE CHALLENGES

Occupational Hygiene
is

**Recognition
Evaluation
Control
Health Hazards**



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PAST FUTURE
CHALLENGES

Why should we prioritise worker health?



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CHALLENGES

Late 1970's

Network of Occupational Health Doctors

Dr Gerry Hall

EMAS

Dr Liam Conlon

Shorts

Dr Hall Campbell

ICI/Lear Fan

Dr Courtney

STC

Ill health a bigger issue than accidents

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Early 1980's

Thousands of Shorts and Ship Yard workers – Noise induced hearing loss – compensation claims in tens of millions.

Hundreds, possibly thousands, suffering from various forms of respiratory disease from welding, soldering, asbestos, Paint spraying etc.



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1980's
Noise Levels – 100+ dBA



Changing Technology

1984 - Lear Fan – 50% of work force suffering from sensitising dermatitis -
compensation claims £4million+

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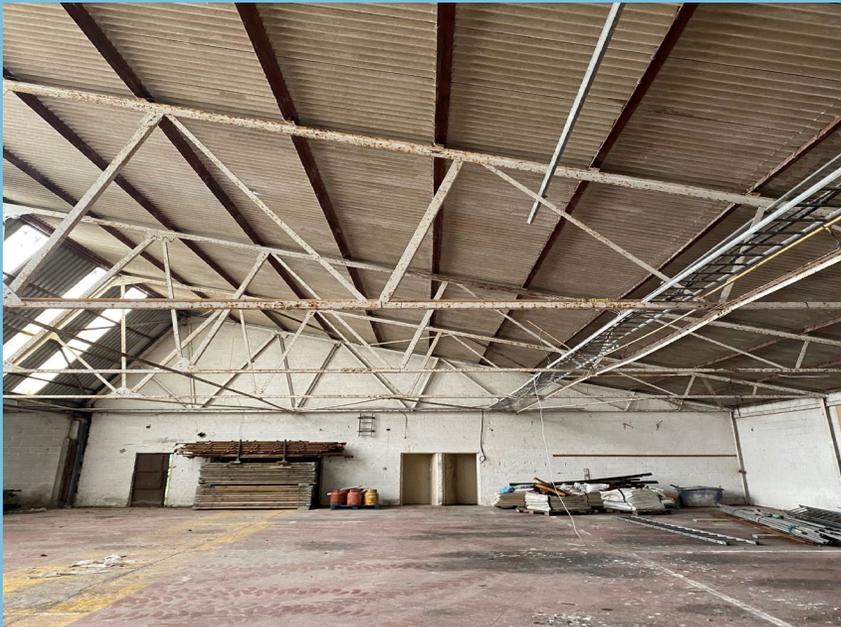
PAST PRESENT FUTURE
CHALLENGES

1983

Hansard 28 July 1983, Vol 46, C1411

Asbestos - "It is not a substitute for which one can set a level below which there is no risk but a substance about which we do not know the lowest level of risk. We must, therefore, assume that a single fibre could do real damage which may not be seen for 20 years or more"

Minister Gummer - Member for Suffolk



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1988 - Big Game Changer

From HASAWO - General Employer Duties

To ensure SFARP

Safe use, handling, transport and storage of articles and substances

To Control of Substances Hazardous to Health Regulations

Risk Assessment

Prevention/Control Exposure

Use and maintenance of Control

Monitoring Exposure

Health Surveillance

Provision of Information Training

Arrangements to deal with Emergencies (1999)

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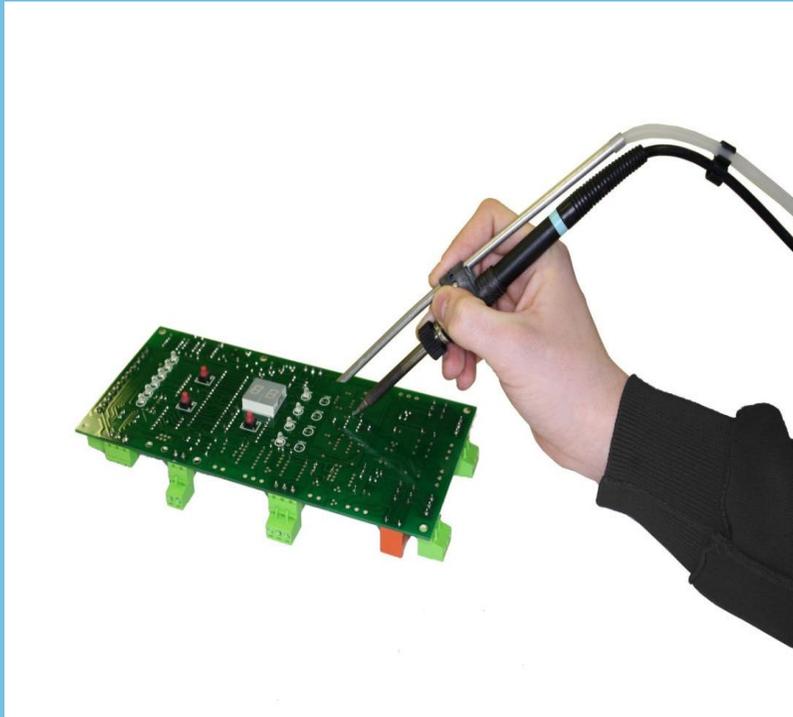
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COSHH Issues

Hierarchy of Controls

Maintenance of Controls - LEV

Monitoring Exposure - MDHS



Occupational Hygiene Survey Reports

Recent HSENI study highlighted a general lack of detail and clarity

- Client details, site address, terms of reference, service provider detail - names/competency/experience/authorisation of report
- Description of the type of work processes/task/activity, substances and materials used, employee work patterns and exposure period
- Existing controls in place, LEV, PPE, RPE
- Sampling methods, equipment used, period monitored, total number of employees exposed
- Calculation of results in relation to Workplace Exposure Limit
- Health surveillance often stated but not explained.

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HSENI study on LEV Reports

- Did not give enough detail of systems, eg photographs, diagrams, measurements taken, test points
- Reference to commissioning report data
- Judgement on system performance
- Comments on how operatives used the LEV

Methods for the Determination of Hazardous Substances

MDHS 14/4

General methods for sampling and gravimetric analysis of respirable, thoracic and inhalable aerosols

- End result - time weighed average concentration

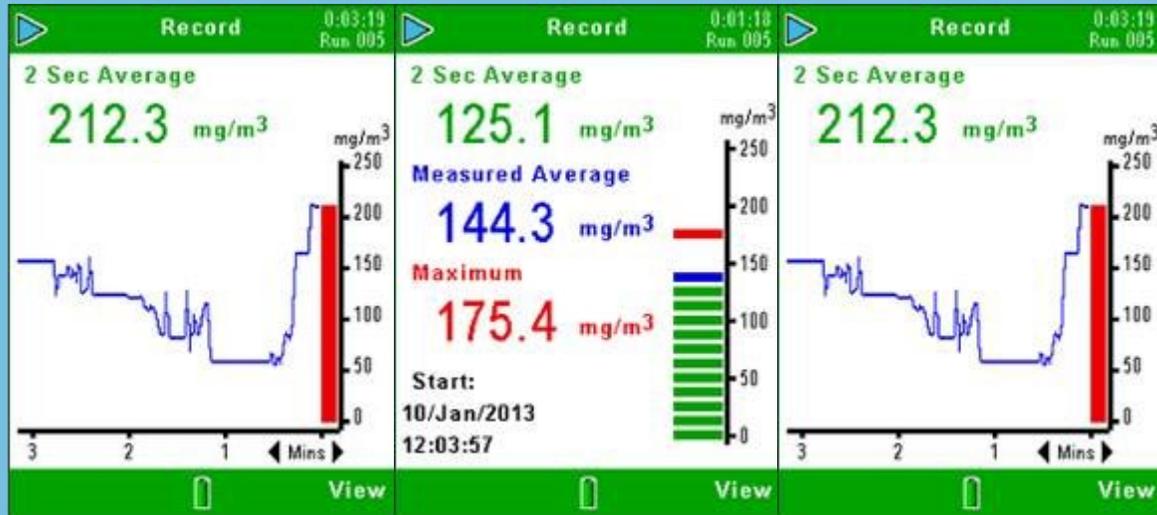
MDHS List needs to keep pace with changing technology: Direct Reading Instruments

- Can provide time weighed average concentrations
- Real time concentrations
- Identify when and where peak exposures occur
- Useful for substances with acute effects

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Real Time Dust Monitor Casella Microdust Pro



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MDHS 25/4 Organic Isocyanate in Air

This is the only method that allows data generated to be compared directly with WEL's

Need to work under a Home Office Licence

The sampling media used in MDHS 25/4 contains 1-(z-methoxyphenyl) piperazine, known as 1,2-MP. This is a controlled drug and those supplying or handling these sampling medias can only legally do so under a Home Office Licence. Members of BOHS Faculty of Occupational Hygiene can work under a BOHS Group Authority Licence (GAL), subject to certain conditions.

But not in Northern Ireland !!!

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HSE Asbestos Guidance

The Licensed Contractors Guide

HSG247 - Published 2006

Asbestos Essentials Guide

Provides good general guidance but lacks required detail

The Non-Licensed Contractors Guide

Introduced 8 years ago but never published

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Keeping Pace with Changing Technology

Exposure to silica from engineered stone

- Worktops
- Silica content - up to 90%

Cutting, sanding, drilling causing high levels of airborne silica.

Significant issue in Australia

Safe Work in Australia - National policy body has recommended a prohibition on the use of engineered stone

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EU Protection of Workers from Asbestos at Work

OEL or Control Limit for Asbestos to decrease by 10fold 0.1 f/ml to 0.01 f/ml without transition period (use of PCM).

Following transition period (max 6 years) - move to SEM

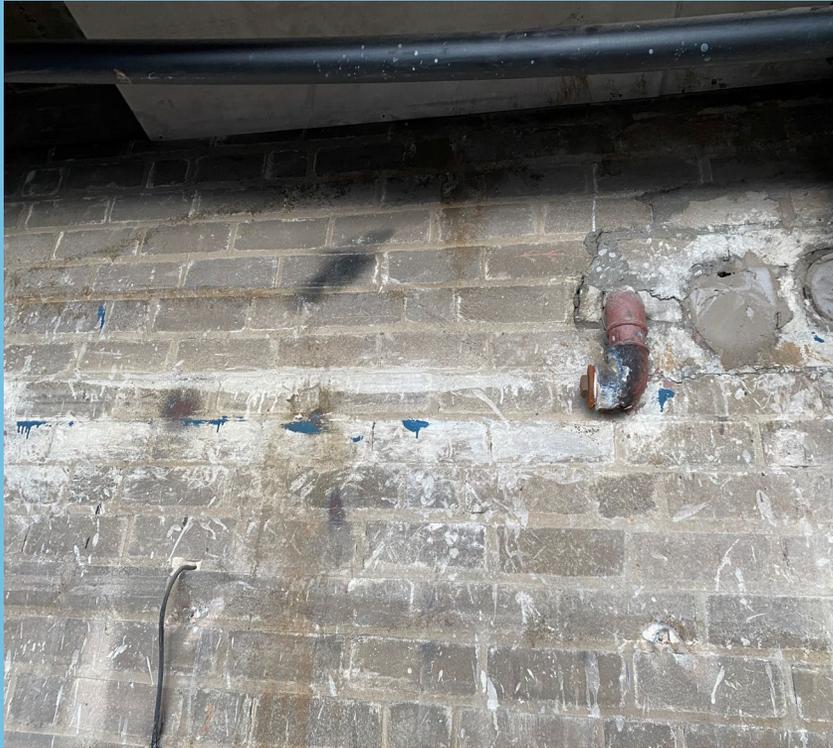
OEL to reduce to 0.002 f/ml



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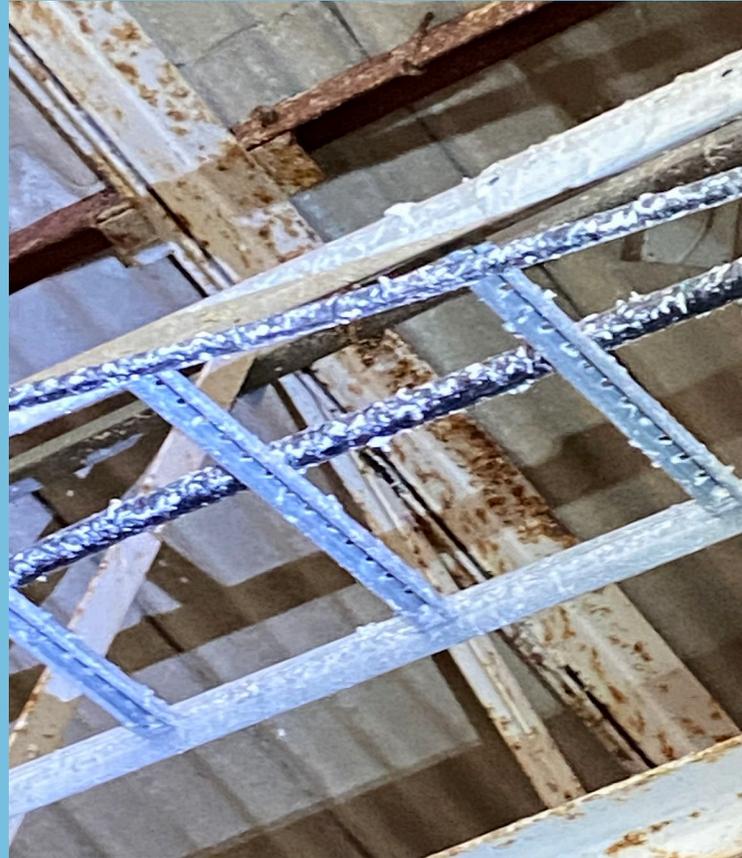
Public Sector



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Private Sector



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Graphene

Extracted from graphite and is made of pure carbon

- 200 x stronger than steel
- 5 x lighter than aluminium
- Conducts electricity with no resistance or heat
- Transparent, absorbs little light
- Very flexible

Construction products: for strength and sustainability

Health: bones, muscles, prosthetics

Batteries: smaller, lighter, charge faster, last longer than lithium - ion

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Graphene (contd.)

Is Graphene safe?

No long-term studies/research.

The more carbon nanomaterials like graphene that accumulate in the body, the riskier it can be for organs to function adequately. Jagged nanoparticle edges have been found in the immune cells, skin and lung cells, showing that it is possible for graphene to be dangerous in the long term.

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Please visit BOHS stand in the Exhibition Hall

Informal networking at end of Conference

Free NI Webinar on 29 November 12:00 - 13:30
Work-Related Ill Health Crisis

www.bohs.org