

THE DAILY HAZARD

The tragedy of timber treatments

'It's a rotten world without it.' This is the proud boast for one wood preservative, emblazoned on hoardings countrywide. But for many callers to the Hazards Centre, the world turned rotten after they were exposed to timber treatment chemicals. Complaints of headaches, nausea and sickness for weeks afterwards are commonplace. For some, these symptoms are just the start of the problem...

In the autumn of 1983, John Hunter treated his home with Remtox, a wood preservative containing the insecticide diel-drin, and the fungicide TBTO. John's health deteriorated. He suffered a dry skin rash which itched and burned so intensely that he found it almost impossible not to scratch, sometimes drawing blood. Nervous symptoms included headaches, noises in the head and trembling. 'I cannot sleep, my mind doesn't work and I cannot look after my business! I am desperate', he



told the Hazards Centre. John never recovered. Three years later he was dead.

Paul Murphy had to give up his job after the wood preservative Triton was sprayed in his home. Three different doctors referred him to a psychiatrist

when he complained of depression, anxiety, palpitations, weakness and breathing difficulties. Symptoms started immediately after his house was treated. Months of ill-health followed. He was too sick to work. Finally, nine months after the initial

treatment, a blood sample was taken for analysis by Dr Wallace of the Employment Medical Advisory Service. Paul's blood was found to contain 15.2 nmol/litre of lindane, the insecticide in Triton. This concentration is many times that found in the general population. A re-test was ordered. This time the level was higher - 18 nmol/litre.

Rentokil insists that the danger is in the application. 'It's important that whoever does the job uses proper protective equipment. We recommend that treated areas are vacated for 48 hours afterwards,' said Peter Bateman, their remedial adviser in charge of research.

Similar advice was given to Ann Brown when her home was treated with Triton One in August 1984. She obliged, moving out for two days. On returning, floors were still wet. Later she discovered fluid dripping through a ceiling light fitting. Ann and her three-year-old daughter became ill almost immediately. They suffered swollen eyes, headaches, blocked noses, diarrhoea, regular vomiting and general tiredness. Medical tests were inconclusive, but mother and daughter were still ill at Christmas that year.

Perhaps their illness is not so surprising. A study in 1983 by the Building Research Establishment demonstrated that the concentration of pesticide in the air can be expected to rise for several weeks after a treatment. In one case, a highly toxic insecticide was found to be above acceptable airborne levels for nearly two years after the treatment.

The sad truth is that none of these illnesses needs ever arise. There are over 100,000 wood preservative treatments in Britain each year. Wood in a suitable environment won't rot. And is the treatment really worth the risk?

Centre gets full funding

After much delay, we finally heard in July that the London Hazards Centre was to receive full funding for 1987/88 from the London Boroughs Grants Scheme. We were particularly relieved that the committee agreed to fund our information development work, which includes two jobs previously financed by a two-year grant from the GLC. But cuts next year are in the offing, as the committee indicated that it might not maintain this year's level of support.

Changing faces

○ Alex Balsdon, the first person to start working in the Hazard Centre's Portakabin in May 1984, is leaving us to live

in the Scottish Highlands. We will miss her multi-talented hard work and company, and envy any workplace that manages to harness her energies.

○ Chris Udenze started a six-month sabbatical in August to complete his medical training. Nilou Hawthorne, his job-sharer, is working full-time in his absence.

○ Two active members of the Centre's management council also left recently. Reg Green, who represented the TGWU Agricultural Workers Trade Group, has gone to Brussels where he takes up a post as health and safety researcher for the International Confederation of Free Trade Unions. Jenny Davenport, representing the NCU North London Central Internal Branch, will be particularly missed from the Centre's Women's Group.

Black workers' meeting

Nilou is co-ordinating a meeting of Black workers to review the Centre's progress in providing information and resources to Black groups. Contact the Centre for more information. The meeting will be held on Thursday 17 September at the Hazards Centre, 6.30pm.

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Guards go: safety goes underground



‘You can see the difference since OPO. Drivers used to socialise in the canteen. Now they sit alone. Morale is right down. They just get their jobs over and go home’

Kevin Rose, ASLEF rep

There are now no guards on London Underground's Piccadilly Line. On 30 August, despite doubts over the safety of One Person Operation (OPO) including a report from its own medical officer, LRT started to press ahead with OPO on the deep tube lines – without local union agreement. The Jubilee Line is scheduled to go OPO in late

1987, and the Bakerloo in 1989. The Central line will follow.

Use of OPO on the shallow lines (Metropolitan, District, Circle) since 1984 has made the problems clear. OPO isolates drivers, gives them two jobs to do on lines designed for crews, and leaves them alone in the face of emergencies.

LRT's own study on OPO and

stress is sketchy but confirms what union reps have already highlighted: unreliable radios, unclear platform monitors, awkward door controls, fear of violence, and over-long driving times. The survey shows increased tiredness, difficulty in concentrating and loneliness.

The unions are calling for a properly designed and funded stress survey by an experienced Cambridge University unit.

ASLEF and NUR are still waiting for LRT to come up with an acceptable way of dealing with deep-tube emergencies such as operator collapse or fire. There have been at least three serious tunnel fires since 1976. LRT claims that driver collapse is too rare to bother about. But ASLEF sources say that at least three OPO operators have collapsed on duty since 1984, and that the absence of a guard led in at least one case to a delay in medical attention. By the start of August, operators' training was still not covering this kind of situation. Nearly 100 new operators have written to LRT requesting proper training in emergency

procedures.

For passengers, absence of guards can increase fear of violence. And in emergencies, a guard may separate life from death. In accidents at Holland Park in December 1985 and Kensal Green in October 1986, LRT said that guards saved lives. At Baker Street in June this year a passenger died after falling between carriages as the train pulled out. At this stage the driver is 'blind'. A guard can still watch the platform.

The Victoria line, a deep tube designed for OPO, has semi-automated trains. When OPO was first proposed for the deep tubes, semi-automated trains were considered essential. This idea disappeared in 1984, around the time that LRT started cutting costs.

London Underground scrapped 986 jobs in the year to March 1987. The government has told them to cut 'unit costs' by 2.5 per cent a year.

○ More information and leaflet *Goodbye Piccadilly* from LSPU Transport Group, 20 Vauxhall Bridge Road, SW1; 630 8094.

Asbestos cement myth is booted out

A vigilant trade union safety representative at the Ernest Bevin secondary school in Wandsworth has helped to destroy the myth that asbestos cement is a relatively safe material.

The rep was concerned that unsupervised pupils in this all-boys school were kicking the asbestos cement panels around the doors. And when the doors slammed, the frame holding the panels could be seen to shake.

ILEA inspected and found the panels were painted and seemed to be in good condition. All the same, they agreed to do 'reassurance tests'.

The results were anything but reassuring. The table shows highest and lowest results.

Analysis of the fibres using an electron microscope confirmed that they were amosite (brown asbestos).

The report from London Scientific Services pointed out that the tests were designed to represent the 'worst possible' case and the tented enclosure in which they were done would have restricted air movement and dilution. And there may be some comfort for ILEA in the fact that the material was slightly softer than most asbestos cement.

ILEA was not reassured. The asbestos cement panels were removed from the school during the Easter holidays. Since then London Scientific Services has been doing 'more comprehensive tests' in similar buildings.

The results are eagerly awaited, not only by the workers and pupils in Ernest Bevin School, but also by all those agencies which shared ILEA's view that the removal of asbestos cement had a low priority.

Test simulating 'abuse'	Fibre count in air fibres per millilitre (f/ml)
● Door slammed five times at start of air sampling period	0.16 – 0.33
● Door slammed five times, then panel kicked for 10 minutes	0.43 – 0.87
● Panel kicked for 10 minutes	0.17 – 0.31

These levels are between 16 and 87 times ILEA's 'acceptable level' of 0.01 fibres per millilitre of air.

What to watch for



Asbestos cement is everywhere – millions of tons have been used in buildings. Common locations are corrugated sheet roofing; flat sheets for walls – sometimes roofs – of sheds and garages; gutters and downpipes; external and internal wall panels in system built flats; 'slates' for roofs and wall hanging; 'weatherboard'; tiles for flat roofs; cable ducts, water tanks; water mains, sewer pipes and boiler flues; lining and shelves in heating and drying cupboards.

For many thousands of people in older converted property the nearest and most dangerous installation is the sheeting on 'fire doors' (this form of asbestos shatters and gives no protection in a fire). Slamming such doors can be expected to give levels of airborne fibre similar to those at Ernest Bevin School.

Our pictures show: a roof of this 'durable' material after 40 years; tiles on a flat roof less than a year after 'sealing' with a bitumen emulsion.



Why you shouldn't wait for the EHO to drop in

London is facing a law and order crisis. It threatens the health and safety of the millions of people who live and work in the capital. Yet most people don't even know the official title of the enforcement officers whose job it is to police the safety of our food, air, water and places of work.

They are the environmental health officers (EHOs) – also known as public health inspectors – employed by borough councils. There are 6,000 of them in the whole of the UK. Their professional body, the Institution of Environmental Health Officers (IEHO), estimates that 350 EHO posts around the country are currently unfilled. The worst shortages are in London and other metropolitan areas.

'On the latest available figures there were 91 vacancies unfilled in London, with another 12 posts frozen or unfunded,' said Clive Wadey, assistant secretary of the Institution. 'Those figures are 18 months old and it's probably got much worse since then.'

'Over the whole of London the shortfall is about 10 per cent, but there are big variations between boroughs. Merton, for example, has more than a third of its posts unfilled.'

One London borough is so understaffed that it has abandoned all routine work, such as preventive inspections of workplaces. It can handle emergencies only. Essential new tasks, such as health education, can be tackled only by taking staff off other duties. But there is no budget for actually doing the

work.

Ratecapping means the council cannot boost salaries enough to stop EHOs leaving, let alone attract staff to fill vacancies. Morale is desperately low in what used to be one of the best council departments in London.

We have not named the local authority. To do so would be a signal to employers, shopkeepers and landlords in the borough that whatever law they're breaking, they needn't worry about being caught.

Other London boroughs may soon be in the same situation. Five of them took part in a survey of 40 local authorities by the Local Government Training Board (LGTB) published in April. 'No department claimed to be able to meet the minimum statutory duties required of them,' said the report.

The crisis in environmental health is a direct result of government policies. Cuts in education have closed the university and college courses where EHOs are trained. Without an increase in the number of trained EHOs, a successful recruitment by one authority usually worsens the staff shortage in another. And cuts in local authority budgets prevent most London boroughs from offering the higher salaries needed if staff are to afford London house prices.

So what is the government's response to this crisis in law and order? In documents such as *Lifting the burden* it advocates 'deregulation' of health and safety enforcement and 'self-policing' by employers!

And how it could be . . .

Despite the crisis in staffing, resources and morale in their environmental health departments many local authorities are seeking a new and more positive role in the public health movement.

This was the theme of a two-day conference, *Rethinking Public Health: a new agenda for local government* in July. Organised by Health Rights and hosted by Birmingham City Council it brought together health professionals, EHOs and other council officers, trade union representatives and community-based organisations.

The conference agreed that

public health issues must be taken up by local authorities in a more systematic way, integrating the work of different departments and services, and encouraging more locally based initiatives.

A new national organisation, the Public Health Alliance, was launched at the conference. Its aim is 'to identify and publicise all risks to health and work for their reduction or complete removal'.

○ *More information about the PHA and copies of its 10-point charter available from; Public Health Alliance, c/o HVA, 50 Southwark Street, SE1.*

Private water or public health?

Privatising the water industry would be an economic and public health disaster. That is the strong message of a new video, *On the Waterfront*.

The video shows that the industry needs massive investment. In 1979 the National Water Council estimated that it would cost £28 billion over several decades to restore the crumbling sewer system, with another £13 billion to repair damaged water mains. Cleaning up the nitrate pollution which now makes water unsafe for millions of consumers would cost a further £200 million.

It doesn't sound like a good investment – until you learn that the industry is to be sold at the knock-down price of £7 billion. Its assets alone are worth £27 billion.

For the consumer, privatisation will bring two hazards. Water will be metered and very expensive. Worse, as the film shows, the sewerage and water

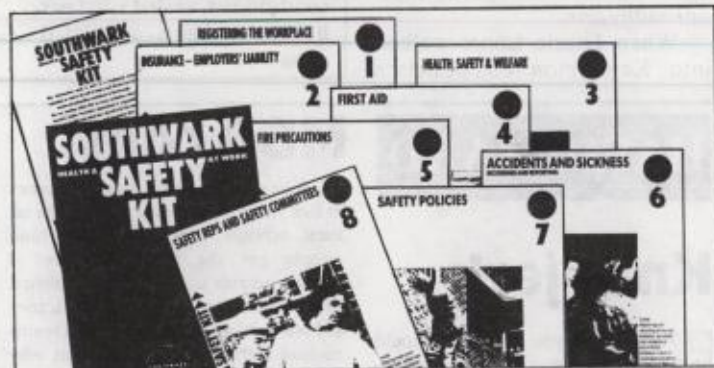
distribution systems which are fundamental to public health are unlikely to be overhauled. Typhus was found in Bradford Beck last year, following hot on the heels of a dysentery epidemic in the city. All the signs are that diseases like dysentery, typhus and cholera will become more commonplace. In the four years up to 1985, for example, reported cases of dysentery increased by 60 per cent to 827 in London.

On the Waterfront was compiled by Campaign for Water, a coalition of trade unions, community groups and voluntary organisations as diverse as the Ramblers' Association and the London Hazards Centre which got together last year under the slogan 'Water Works – Keep it Public'.

The video can be borrowed free from the Hazards Centre.

○ *To contact Campaign for Water write to: Alan Jackson, NALGO, 1 Mabledon Place, London WC1.*

Council moves on work hazards



The *Health and Safety at Work Kit* produced by the London Hazards Centre for the London Borough of Southwark was published in July. Designed for employers and workers, the kit will go to the 2,500 workplaces where the council is responsible for enforcing health and safety law.

Each workplace will get two kits, one for the employer and one for the workforce. The tear-off prepaid receipt card forming part of the folder must be signed by an employees' rep and should persuade employers to hand over the workers' copy.

The kit contains an introductory leaflet and a checklist which provides the key to the eight 'action sheets'. These cover the essentials of health and safety organisation – from registering with the relevant enforcement

agency to recording and reporting accidents and ill-health. Most sheets have their own checklist for workers. An entire section is devoted to safety reps and safety committees.

Three tear-off 'Help' cards are an essential part of the kit, giving employers and employees or their safety reps an easy – and if necessary anonymous – way to call for an inspection.

The Hazards Centre has a limited number of Safety Kits available for distribution, at cost, outside Southwark (£1 including p&p).

We hope that other local authorities will follow the pioneering initiative of the Employment and Training Department in Southwark and commission their own version of the pack from the Hazards Centre.

Symptoms show office environment is cause of ill-health

Workers survey the damage

You might think that office work entails nothing more strenuous than chewing the top of a biro and nothing more hazardous than drinking what passes for coffee from the vending machine. If so, you may be surprised to learn that in the year 1985-6 190 workers received 'fatal or major' injuries in office accidents (IEHO annual report 1985-6).

And were you aware that tenosynovitis, a disease that cripples the hand and the wrist, is the second most common prescribed 'industrial' disease, and that many of the thousands afflicted each year work in offices? Or that surveys have found the second most stressful job is that of a secretary, with labourers (not jet-lagged executives) at the top of the league? Recent reports suggest that up to 80 per cent of office workers suffer ill-health associated with the building in which they work. Accidents, diseases, stress and building sickness syndrome make the office worker's lot a distinctly unhealthy one.

When Laurie Lopes walked into Kensington and Chelsea

Town Hall for her first day of work in January 1979, the sight of a worker watering the carpets raised an eyebrow. 'Static,' she was told. But static proved to be only one of a host of unpleasant extras that came with the job - many workers felt that they suffered far more than their share of ill-health. Now a NALGO branch survey has confirmed that the pattern of sickness in the Town Hall is remarkably similar to that found in other air-con-

ditioned, sealed buildings - 'building sickness syndrome'.

Building sickness is described by the World Health Organisation as general non-specific symptoms of malaise, in particular irritation of nose, throat and eyes, lethargy and headaches, experienced at work but ceasing shortly afterwards. The NALGO survey, conducted with assistance from the Hazards Centre, identified the Town Hall as a case in point (see table).



The typical modern office - air conditioned, sealed windows, fluorescent lights, and tinted glass . . .

NALGO Kensington & Chelsea Survey Results

Symptom	% usually or always suffering the symptom at work
stuffy nose	42
skin dryness	41
lethargy	40
headaches	30
eye irritation	30
irritated throat	30

. . . and the typical modern office worker - headache, lethargy and irritated eyes, nose and throat.



Kensington and Chelsea Town Hall - not as nice as it looks?

Half of the workers thought there was usually too little air in the office, about 70 per cent found it too dry and stuffy - all factors consistent with the symptoms recorded. Virtually all workers reported they had no control over the temperature, ventilation, humidity, and noise in their office. More than half had little or no control over their lighting.

Laurie, now secretary of the NALGO branch, is determined to see workplace conditions improved. 'It is typical of our management's uncaring attitude that genuine concerns have been dismissed as "imagined" or "hysterical"'. All we get are repeated assurances that there's no problem. But now our survey has clearly demonstrated that persistent symptoms of lethargy, itchy eyes, dry skin and sore throats are the result of an unhealthy workplace, not fertile imaginations,' she said. 'We will use these findings to insist management improve the woeful office heating, lighting and ventilation, deal with the real cause of our ill-health and give us some control over the working environment.'

HAPHAZARD

Knee jerk

□ 'AIDS - how you can't get it' could be the next campaign from the Environmental Health Department at Hammersmith and Fulham. The borough has mounted a determined programme to train home helps and other staff who may be at risk of contracting the disease. Now, says divisional EHO Debbie Herbert, a new campaign is needed to stem the tide of panic, prejudice, harassment, dismissals and evictions aroused by fear of catching the disease.

Judging from this cutting from the *Guardian* of 28 July, the barbers of Belgrade could do with a short sharp course in Hammersmith and Fulham:

No shorts cut

THE BARBERS' Association of Belgrade has instructed its members not to serve customers in shorts, as a precaution against the spread of Aids. The decision was taken on the recommendation of the city's Committee for Health, which ruled that Aids can be transmitted by bare legs.-AP.

MOD cons?

□ A large factory explodes three times in five years. Workers are badly injured, local schools evacuated. Each time people get the same assurances - 'there's no risk to health'. Then silence. Why? The exploding Centronics factory at New Addington near Croydon seems to lead a charmed existence. Just why are the authorities so slow to close, prosecute or even criticise this industrial timebomb? Could the Ministry of Defence (MOD) have more than a passing interest in Centronics' affairs?

An ex-Centronics worker told the Hazards Centre earlier this year that he was glad to be out - conditions were bad and accidents commonplace. He alleged that an explosion whilst he was with Centronics was never properly investigated because of security surrounding MOD work.

John Holmes, an AEU shop steward in a neighbouring factory, provided us with a wealth of information about the latest explosion and Centronics' chequered history. He explained that the latest explosion followed a similar blast in which two workers were badly burned. The most recent explosion, in July this year, witnessed chaotic emergency procedures. Factories in the area continued to operate whilst an adjacent school was evacuated. 'The headmaster of a local school said he knew nothing about it until he saw police going round the playground with loud

hailers', said John. 'All the police chief could say was "We can't be expected to tell everyone, can we?"'

Centronics is not one of the sites covered by the CIMAH Regulations. These apply to installations the Health and Safety Executive considers to be 'major accident hazards' (see *Daily Hazard* Nos. 8 and 11). If emergency procedures prove so farcical at a plant the HSE thinks is relatively safe, what happens when one of the big ones goes up?

Lucky break

□ Ernest Bevin School in Wandsworth (see page 2) may go down in history as the place where the few firms still clinging to the pernicious trade of asbestos cement manufacture got their comeuppance. No longer can they claim that the fibres of asbestos are 'locked safely into the cement.'

Their only hope may be to capitalise on the fact that this remarkable school with its record-holding 400 separate locations for materials made from the 'miracle fibre' has produced two snooker stars - Jimmy White and Tony Meo. Could the inhalation of asbestos have produced this statistically improbable cluster? Or were the school buildings so revolting that the lads bunked off to the pool hall? We'll never know. And, if both should die from lung cancer, we won't know either if it was the asbestos or the Embassies.



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