

# Government attacks Asbestos Compensation

*"The Minister talked about the compensation culture, but it is very easy to stop that culture: tell employers to stop killing people at work and to stop poisoning people at work. Then people would not be able to claim compensation."*

On Tuesday 17th April the House of Commons debated amendments to the controversial Legal Aid, Sentencing and Punishment of Offenders Bill 2010–12, the LASPO Bill, in particular amendment 31 about people with the asbestos cancer mesothelioma and other fatal respiratory industrial diseases. Amendment 31 was formulated in the House of Lords – after persistent and successful lobbying by the Asbestos Victims Forum and its secretary Tony Whitson. It is hard for a non lawyer to get their head around some of the technicalities proposed in LASPO – but the gist of this debate was that if the Bill is passed no win no fee arrangements for personal injury claims will not be available as at present. "Success fees" and associated premiums for the lawyers will not be recoverable from the losing party (the company or their insurers). Instead, this will be paid out of the damages of the injured person, meaning the mesothelioma victims could lose 25% of their damages. The Lords amendment – which the Government opposed – would exclude asbestos claims from the proposed changes. In the debate John Woodcock, MP for Barrow, explained:

"On average, those who successfully pursue claims for mesothelioma see compensation in the order of £65,000. Under the unamended Bill, their lawyer could receive 25% of that. On top of that, their after-the-event insurer could take an increased premium, and because



*Asbestos Victims Forum at one of many protests about Fat Cat insurers*

mesothelioma claims are risky, those premiums can be very high indeed."

All non-clinical negligence personal injury cases have been out of the scope of legal aid since 2000. And Kate Green, MP Stretford and Urmston, asked:

"Does the Minister not accept, though, that some cases will now simply go unrepresented and unpursued, and that victims will instead have to rely on the Government's own compensation scheme, in which the average payment is £16,000? This change will be an expensive choice for the Government, because it will lock people out of access through the courts."

London Hazards is printing – almost in full – the speech of Dave Anderson, MP for Blaydon and former President of Unison, because it explains the issues in layman's terms:

## Dave Anderson's speech

"It is 43 years since I started work as a coal miner, and during the many years for which I was a union rep I saw some horrendous accidents: men who had their legs cut off by broken ropes or broken chains; a man buried alive under thousands of tonnes of coal; a man impaled on the roof of a coal mine by a machine; and a man whose pelvis was broken by another machine. I represented people with stress-related illnesses. I represented thousands of people in my 35 years as a trade union representative and I sat on social security tribunals, went to social security tribunals and sat on industrial tribunals, but nothing could convince me that anything is more pernicious than the situation for people who are suffering from mesothelioma."



# Asbestos Trigger Case Victory

*Asbestos victims celebrated a victory in the Supreme Court on 28th March when the Law Lords ruled insurance liability and damage for causing mesothelioma and other asbestos cancers begins when workers are exposed to asbestos – not when cancers develop many years later.*

Called the Trigger case, the legal battle was about claiming from the insurer at the time of the exposure which 'triggers' a cancer or when the disease is detected. Some facts about the case:

- ▲ the case goes back to 2006 although some of the victims died even earlier
- ▲ 6,000 families were involved all with someone who died or is suffering from mesothelioma
- ▲ payouts to these victims could be £600m
- ▲ up to 25,000 future claims, and compensation of around £5bn, were at stake
- ▲ the insurers in the case were: MMI, Builders Accident, Excess and the Independent Insurance Company. They said an employer's liability was restricted to when the cancerous tumours develop, instead of when victims were exposed to asbestos
- ▲ many building firms from the 1960s and 1970s no longer exist & if claims cannot be made against their insurers from that period – the victims don't get any compensation
- ▲ most insurers, including the Association of British Insurers, distanced themselves from the case
- ▲ compensation payments for mesothelioma are usually in the region of £200,000
- ▲ from 1967 until 2006, insurers had been paying out routinely on cases such as these.

## Government attacks Asbestos Compensation

*Continued from page 1*

Mesothelioma is an exceptional case, because of what the disease does...[but]...

The real reason why mesothelioma is an exceptional case is that the problem was known about for more than a century. Asbestos was identified as a poisonous substance in 1892, yet employers knowingly exposed their workers to it day in, day out. They knew the dangers and ignored them for decades. They were eventually held accountable, but ever since the first successful case against the employers and their insurers on asbestos-related diseases, the employers and the insurers have kept coming back to the courts and to this place.

The hon. Member for Broxtowe (Anna Soubry) asked why we in this place were involved in this issue, but we constantly have to rewrite the law because people are using the law and this place to get away from their responsibilities. The decision on pleural plaques a few years ago was welcomed by KPMG because, as it said, that was a £1.4 billion handout to the insurance industry in this country. Those were the people who were clapping their hands on that day, not those who have asbestos-related diseases.

What can I say? Someone said earlier that no empathy is being shown, but I think that empathy is being shown – to the insurance companies. We can take our guidance from that.

The Minister talked about the compensation culture, but it is very easy to stop that culture: tell employers to stop killing people at work and to stop poisoning people at work. Then people would not be able to claim compensation. That is exactly what needs to be done.

### South Africa and Namibia

We are talking about employers who have contempt for workers and their families. They let workmen go home in dirty work clothes that their wives then washed, and became infected with mesothelioma through doing so. What happened was known by employers. We are talking about employers who were using young kids in Namibia to fill plastic sacks with raw asbestos. They put young kids of

seven, eight or nine in the sacks to tamp the asbestos down. That is the type of people we are dealing with—people with no regard for human life. Some successful cases were brought by a trade union in South Africa and they got £38 million in compensation. That £38 million was welcome but it did not save the lives of any of those kids.

### A special issue

We have had 42,000 people die in the past 40 years in this country and 60,000 more will die in the next 50. That is more than 1,000 people a year and more than were being killed in the coal mines in this country in the disastrous years of the 1930s. That is why this is a special issue. We should be looking to people such as Chris Knighton in the north-east of England who has led a campaign on behalf of her husband who died 15 years ago – a man who was fit enough to ride from Newcastle to Berwick on a bike on a Sunday morning and think nothing about it. He fell down one day in the local club and when he went to see the doctor, the doctor told him, "You've got mesothelioma." He asked, "What does that mean?" The doctor said, "It means you're going to be dead in nine months' time." Those are the people we are standing up for today. We are not standing up for big business or insurers – we are standing up for ordinary people who have been exploited for years. If we do not support the amendments to this legislation we will be letting those people down. I say to the Liberal Democrats in particular, "If you ever want to claw back from where you are now, support these amendments tonight. You will never be forgiven if you don't."

The amendment was lost by 36 votes – the closest vote since tuition fees – 5 Conservatives voted against the Government and 2 Liberal Democrats. The Government usually win by over 70 votes. It now goes back to the House of Lords and the Asbestos Victims Forum hopes the Peers stand firm.

It then went back to the House of Lords with the Asbestos Victims Forum lobbying for the Peers to stand firm – see page 5.



# Changes in Asbestos regulation

The Control of Asbestos Regulations 2012 came into force on 6th April 2012. This updates the previous 2006 regulation and takes account of the European's Commission's view that they had not fully implemented the EU's directive on the protection of workers from the risks to exposure of asbestos at work. Some of the requirements of the 2006 regulations remain the same, such as:

- ▲ if **existing asbestos containing materials are in good condition** and are not likely to be damaged, they may be left in place; their condition monitored and managed to ensure they are not disturbed.
- ▲ if you're responsible for **maintenance of non-domestic premises**, you have a duty to manage the asbestos in them, to protect anyone using or working in the premises from the risks to health that exposure to asbestos causes.
- ▲ if you want to do any **building or maintenance work** in premises, or on plant or equipment that might contain asbestos, you need to identify where it is and its type and condition; assess the risks, and manage and control these risks.
- ▲ **the control limit for asbestos is 0.1 asbestos fibres per cubic centimetre of air (0.1 f/cm<sup>3</sup>)**. The control limit is not a 'safe' level and exposure from work activities involving asbestos must be reduced to as far below the control limit as possible.
- ▲ **Training** is mandatory for anyone liable to be exposed to asbestos fibres at work. This includes maintenance workers and others who may come into contact with or disturb asbestos (e.g. cable installers), as well as those involved in asbestos removal work.

## The key changes are listed below:

Low risk work is split into 2 categories – Low risk work exempt from, requirements and Notifiable non-licensed work (NNLW).

- ▲ From 6 April 2012, some non-licensed work needs to be notified to the relevant enforcing authority. Brief written records should be kept of non-licensed work, which has to be notified

e.g. copy of the notification with a list of workers on the job, the type and duration of work with asbestos.

- ▲ By April 2015, all workers/self employed doing notifiable non-licensed work with asbestos must be under health surveillance by a Doctor (minimum of once every 3 years). This will not come fully into force until April 2015. Workers who are already under health surveillance for licensed work need not have another medical examination for non-licensed work.

**But medicals for notifiable non-licensed work are not acceptable for those doing licensed work.**

- ▲ The prohibition of supply and use of asbestos is now covered by REACH (Registration, Evaluation, Authorisation and Restriction of Chemicals Regulations 2006).

For full copy of the new regulation, please visit this link:  
[http://www.legislation.gov.uk/uksi/2012/632/pdfs/ukxi\\_20120632\\_en.pdf](http://www.legislation.gov.uk/uksi/2012/632/pdfs/ukxi_20120632_en.pdf)

## Voting against mesothelioma victims

*The 31 London MPs who voted on 17th April for a Government amendment to reject the House of Lords change to LAPSO to keep industrial respiratory disease compensation arrangements as they are (source Hansard).*

Ellison, Jane	Battersea
Stewart, Bob	Beckenham
Hughes, rh Simon	Bermondsey
Evennett, David	Bexleyheath
Teather, Sarah	Brent Central
Macleod, Mary	Brentford and Isleworth
Neill, Bob	Bromley
Brake, rhTom	Carshalton & Wallington
Hands, Greg	Chelsea and Fulham
Duncan Smith, rh Iain	Chingford and Woodford Green
Villiers, rhTheresa	Chipping Barnet
Barwell, Gavin	Croydon Central
Ottaway, Richard	Croydon South
Bray, Angie	Ealing Central and Acton
de Bois, Nick	Enfield North
Burrowes, David	Enfield Southgate
Freer, Mike	Finchley
Blackman, Bob	Harrow East
Offord, Mr Matthew	Hendon
Watkinson Angela	Hornchurch & Upminster
Scott, Lee	Ilford North
Davey, rh Ed	Kingston and Surbiton
Bokenshire, James	Old Bexley and Sidcup
Johnson, Jo	Orpington
Greening, rh Justine	Putney
Goldsmith, Zac	Richmond
Rosindell, Andrew	Romford
Hurd, Nick	Ruislip
Burstow, Paul	Sutton & Cheam
Randall, rh John	Uxbridge
Hammond, Stephen	Wimbledon



# Battersea Crane Inquest

*On Monday 12th March, at the end of the inquest into the deaths of Michael Alexa and Jonathan Cloke which happened on 26th September 2006, the jury, at Westminster Coroners Court, returned a narrative verdict:*

"Both men died as a result of a crane collapse due to failure of the inner slew ring bolts due to overloading of the counterweight. The overloading was due to an incorrect manual being used in the erection of the crane. On the 25th July 2006, four inner slew ring bolts failed and all of the slew ring bolts were replaced. No investigation was undertaken as to the root cause of the bolt failure. On the 26th July 2006 the crane was returned to service.

At that time there was no adequate formalised process and procedure to allow for faults to be managed, escalated or investigated. In addition there was a vacuum of structured management in the company's service department."

Giving evidence about the cause of the accident Health and Safety Executive inspector Brent Bolton said:

"The machine, owned by Falcon Cranes, should have had eight tons of concrete balancing the weight of its load but the contractor used a manual for a different model which needed 12 tons... the extra weights would have increased the tension on a crucial set of bolts by 100-plus per cent".

The 24 bolts on the crane's slew ring – which allows the top part to pivot – had



*Stop Crane Deaths Now: an earlier event, Michael Alexa's partner Angela Bedy, and his family Liliana, Doru and brother. After the inquest verdict Doru Alexa said: "this is five years of our lives and we are back to square one. There has been no justice"*

been replaced two months earlier after several suddenly broke while in use at the site on Thessaly Road.

Mr Bolton told the hearing: "When we showed the manual that Falcon were using to the manufacturer, they told us that certain pages within the manual had been mixed up with those of other models of crane, and certain pages were missing.

"On every site that the crane was erected in the UK, it had an excess counterweight load on it – by between 16 per cent and 52 per cent.

"An overload of 52 per cent actually puts more than twice the force through the bolts on the slew ring, so the force being felt by the bolts increases by 100-plus per cent."

The coroner, Dr Shirley Radcliffe, did not allow them to consider a verdict of unlawful killing and we can only speculate on her reasons. Tony O'Brien, Construction Safety Campaign, attended most of the inquest and heard the coroner's report on Friday 9th and then the legal challenges and her summing up on Monday 12th March. He told us:

"I think the coroner had a panic when the Falcon team turned up the heat after she told the court she was looking at an unlawful killing verdict. The Falcon

barrister immediately asked for the reasons for why she was considering unlawful killing. She gave them as the irresponsible actions of the managing director Mr Genge, adding to this by saying there were no safety systems in place, no procedures or management in place to investigate the failed 4 bolts. The Falcon barrister put forward that she would be wrong to go in that direction and requested he be allowed to give further submissions over the weekend. She agreed and he went into overdrive putting forward case law argument in over 20 pages of documents.

Then in her summing up to the jury on Monday, she did a U-turn by going out of her way to not put any blame on the managing director.

I think too much reliance went into placing Mr Genge as the main issue – other unlawful killing verdicts such as the Canary Wharf Kieron Deeney case, the St Johns Bridge collapse case – did not focus on the role of the managing director.

The jury's narrative verdict was very critical of the failings of the company".

▲ Information from the *Evening Standard*, *Construction Enquirer* and *Construction News*.

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and others.**



## Lewisham firm prosecuted for unsafe housing

A housing management company has been prosecuted by Lewisham Council for the poor management of a rental property in Catford. Silver Wharf Ltd, registered in Sydenham, owns and manages a portfolio of properties, including a large Victorian house in Brownhill Road in Catford.

Silver Wharf started to convert the house into five self-contained flats. However, the Council received complaints from local residents about conditions at the property. Lewisham Council found contraventions of the Management Regulations that govern multi-occupancy

properties. There were concerns over the safety of the electrical installations, lack of security due to a defective front door, leaking water pipes, dumped rubbish in the gardens and various other general repairs that were not carried out to a satisfactory standard. They also found up to ten people already living in the unsafe property.

Silver Wharf were given time to resolve the issues but failed. At a hearing at Bromley Magistrates Court the owner, Silver Wharf Ltd, was fined a total of £3,000 along with £1,507 costs.

## Finchley hotel – Landmark fire case

*A hotel owner ignored fire safety laws but Chumleigh Lodge Hotel Limited and its sole director Michael Wilson have been hit with a £210,000 fine following a successful prosecution by London Fire Brigade in February 2012.*

The case was a landmark hearing for the UK fire and rescue service, believed to be the first time that a jury – rather than magistrates or an individual judge – has convicted a defendant under the Regulatory Reform (Fire Safety) Order 2005.

The offences date back to 18 May 2008 when London Fire Brigade was called to a fire at the hotel on Nether Street, Finchley. The blaze had spread quickly from a first floor guest bedroom, up a staircase to the floor above and along a corridor. Three people escaped from the fire, two by using the stairs and a third by climbing out of a second floor window.

The offences included defective fire doors, blocked escape routes and no smoke alarms in some of the hotel's bedrooms. Mr Wilson was also unable to produce a suitable and sufficient fire risk assessment and was found not to have provided staff with adequate fire safety training.

▲ See: [www.london-fire.gov.uk/news/](http://www.london-fire.gov.uk/news/)

## Evict Rogue Landlords

Shelter, the housing and homelessness charity, is running a campaign highlighting the problems faced by tenants in the private sector with Channel 4's 'Dispatches: Landlords from Hell' programme, shown in December helping to raise the issue.

In a survey of private tenants carried out last summer Shelter found that 34% had landlords who did not carry out repairs and deal with poor conditions, with 7% not carrying out gas safety.

According to Shelter conditions in this sector are worse than other types of housing: 40% of private rented homes are classed as "non decent", compared to 27% social rented, and 30% of owner occupiers. This despite the fact rents in the sector have risen

Local authorities dealt with over 86,000 complaints from private tenants in 2010/2011 and Shelter say while Local Authorities are aware of "some 1,477 serial rogue landlords" only 270 were prosecuted.

Shelter are urging supporters to write to Grant Schapps, Housing Minister, to ask the government to honour pledges to protect tenants from rogue landlords – there are templates on the website, quizzes, polls and lots of detailed policy briefings.

There is also an easy to use form to write directly to your council leader.

Find out more at:  
[www.england.shelter.org.uk](http://www.england.shelter.org.uk)

▲ **Anyone having problems with their landlord right now can ring the Shelter helpline: 0808 800 4444**

## Mesothelioma Compensation

The House of Lords again backed their respiratory disease amendment to the LASPO Bill with the result that on its return to the Commons on the 24th April a concession was made for mesothelioma exempting such claims from paying legal costs until the impact of the Bill is properly assessed. Also the government says it will do something soon about assisting claimants who cannot trace their employer's insurers.

However asbestos causes other cancers – in particular lung cancer; and other industrial exposures lead to fatal respiratory diseases including lung cancer – for example silica, diesel fumes, wood dust, arsenic, cadmium, chromium, nickel (see Hazards Magazine for more on cancer). Whereas amendment 31 from the Lords incorporated all these respiratory disease potential claims – this concession just covers mesothelioma – so sadly much more work needs to be done. But a great victory none the less.

## Bexley infants evacuated because of asbestos

Children aged four to six, were evacuated from Belvedere Infant School, Bexley, in November and the school closed after builders working in the main hall suspected dust contained asbestos. The school was closed until February half-term with Bexley Council and the school having to provide alternative arrangements.

From: [www.bexleytimes.co.uk/news](http://www.bexleytimes.co.uk/news)



# HSE Update

## One in five construction sites fail safety checks

Nearly one in five construction sites failed safety checks during a national initiative to improve construction site safety which is a slight improvement on previous years. Inspectors from the Health and Safety Executive (HSE) visited a total 3237 sites and saw 4080 contractors, but 581 sites were found to have practices that put workers at risk, with a total of 870 enforcement notices issued and in 603 instances work had to stop immediately.

The focus was on high-risk activity including working at height and ensuring sites were in 'good order', being clean and tidy with clear access routes. Inspectors targeted sites where refurbishment or repair work was being carried out across Britain with the aim of reducing the risk of death, injury and ill health. "Of the 50 fatalities in construction last year (2010-11), 27 (54%) were in the refurbishment, repair and maintenance sector."

## RIDDOR Change – 6 April 2012

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995, RIDDOR, requires employers and anyone else with responsibility for health and safety within a workplace, to report and keep records of: work-related deaths, serious injuries, diagnosed industrial disease; and certain dangerous occurrences' such as near miss accidents.

On 6 April 2012, RIDDOR's over-three-day injury reporting requirement changed. The trigger point has increased from over three days' to over seven days' in which a worker is absent or is unable to do work. This excludes the day on which the accident happened but includes any weekends or other rest days. Employers and others with responsibilities under RIDDOR must still keep a record of all over-three day-injuries but do not have to

report them. The deadline by which the over-seven-day injury must be reported has increased to fifteen days from the day of the accident.

In general, regulation 10 of RIDDOR exempts duty holders from reporting deaths and injuries that result from:

- ▲ medical or dental treatment, or an examination.
- ▲ the movement of a vehicle on a road (unless the person was loading or unloading the vehicle or working alongside the road, e.g. constructing or maintaining the road or adjacent buildings, the accident involved a train, or the accident involved the escape of a substance from a vehicle).
- ▲ the armed forces while on duty.

This link explains the changes in more detail: <http://www.hse.gov.uk/pubns/indg453.pdf>

## HSE cost recovery scheme: postponed till October?

The Health and Safety Executive has completed a two-week shadowing initiative to train its inspectors in its new cost-recovery scheme, called Fee for Intervention (FFI). It is expected to start in October 2012. The scheme is to recover costs from those who break health and safety laws for the time and effort HSE

spends investigating and taking enforcement action. The costs will be calculated at £124 per hour. Businesses will have 30 days to pay the fine. HSE is working to provide explanation and advice and to work further with businesses to improve their understanding of the scheme and how it will affect them.

## Proposals to remove fourteen legislative measures

including: Notification of Conventional Tower Cranes (the Crane Register) the consultation document is at: <http://www.hse.gov.uk/consult/condocs/cd239.htm> Consultation ends 4th July.



## Training

### London Hazards training programme

#### COSHH and Risk Assessment

##### Training in Tower Hamlets:

3rd May 2012, from 10am – 4pm.  
Oxford House, Derbyshire Street,  
Bethnal Green, London, E2 6HG.  
For more details contact  
[ikeaigbogun@lhc.org.uk](mailto:ikeaigbogun@lhc.org.uk)

#### COSHH and Risk Assessment

##### Training in Hillingdon:

22nd May 2012, from 10am – 4pm. Barra Hall,  
Wood End Green Road, Hayes,  
Middlesex, UB3 2SA. For more details,  
contact [ikeaigbogun@lhc.org.uk](mailto:ikeaigbogun@lhc.org.uk)

#### Fire Safety Training in Kingston:

8th June 2012, from 10am – 2pm.  
The Royal Borough of Kingston upon  
Thames, Surrey For more details,  
contact [ikeaigbogun@lhc.org.uk](mailto:ikeaigbogun@lhc.org.uk)

#### General Health and Safety workshop in Hounslow:

14th June 2012, 10am – 3pm.  
Green Room, Paul Robeson Theatre,  
High Street, Hounslow, Middlesex,  
TW3 1ES. For more details contact  
[danaion@lhc.org.uk](mailto:danaion@lhc.org.uk)

#### General Health and Safety

##### workshop in Ealing:

28th June 2012,  
10am – 3pm. Ground floor, Monte  
Melkonian Hall, 105A Mill Hill Road,  
Ealing, W3 8JF. For more details  
contact [danaion@lhc.org.uk](mailto:danaion@lhc.org.uk)

#### Fire Safety Training in Hillingdon:

4th July 2012, from 10am – 2pm.  
Barra Hall, Wood End Green Road,  
Hayes, Middlesex, UB3 2SA or  
contact [ikeaigbogun@lhc.org.uk](mailto:ikeaigbogun@lhc.org.uk)

#### General Health and Safety

##### workshop in Newham:

11th July 2012, 10 am – 3 pm.  
Theodora Room, Durning Hall  
Community Centre, Earlam Grove,  
Forest Gate, E7 9AB. For more details  
contact [danaion@lhc.org.uk](mailto:danaion@lhc.org.uk)



# Housing Health & Safety

*The quality of housing plays a decisive role in health. The home should provide a healthy environment as well as protection against the elements, but houses can be the source of a wide range of physical, chemical and biological hazards.*

Many health problems are either directly or indirectly related to the building itself, due to the construction materials that were used and the equipment installed, or the size or design of the individual dwellings.

Healthy housing must be a comprehensive concept taking into consideration a variety of factors contributing to the quality of housing and housing environments. The housing and health regulations targets various aspects directed at controlling:

- ▲ **the immediate environment and neighbourhood** – can be a source of problems such as noise; but can also be a source of pleasure with green spaces and safe public areas for artistic reasons and for giving opportunities for a healthy lifestyle.
- ▲ **the materials used in construction** – regulations have been developed to control the quality of materials used and to prohibit the use of certain materials such as asbestos (see our Factsheets on Asbestos).
- ▲ **the design and layout of the dwelling itself** – this should ensure accessibility for specific users such as children, the elderly or those with physical limitations. The design of dwellings can affect the likelihood of accidents and unintentional injuries.
- ▲ **the amenities to be provided** – space for the preparation and cooking of food and readily accessible sanitary accommodation (at least one bathroom and toilet) are required.

- ▲ **the use and maintenance of the dwelling and its basic equipment** – availability of drinking water supply, heating facilities, appropriate ventilation, natural light and carbon monoxide/smoke detectors (though not compulsory) are important for the health of the occupants and should be made available.

## Housing Health and Safety Rating System (HHSRS)

The Housing Act 2004 changed the way local authorities assess housing conditions. They now assess the conditions of properties using the Housing Health and Safety Rating System (HHSRS) – a health based risk assessment system for housing. It is a purely qualitative approach for the assessment of conditions in existing housing, and evaluating the potential effect of any faults on the health and safety of occupants, visitors, neighbours and passers-by. This system requires an assessment of the potential threat from the condition or lack of adequate facilities or amenities and includes 29 potential hazards.

### Assessment

The principles which underlie it are that:

- ▲ any dwelling should be free from both unnecessary and avoidable hazards

Where any hazards is necessary and unavoidable:

- ▲ the likelihood of an harmful occurrence and the potential harm which could result should be reduced to a minimum.

The HHSRS recommends that the first step in checking the state of a dwelling is an inspection to identify deficiencies that could cause problems for the dwelling as a whole. A deficiency might arise because of the way the dwelling was designed or built in the first place, wear and tear, lack of care and

repair over a period of time, or activities of the occupiers. As far as the HHSRS is concerned, a deficiency is important when it can be seen as able to cause harm when it results in a hazard.

When assessing a dwelling, the local authority officer should take account of

- ▲ the average likelihood for a particular hazard for that type and age of dwelling given in the main guidance
- ▲ any deficiencies which may increase the likelihood of an occurrence
- ▲ how serious the outcome of such an occurrence will be to the age group(s) most at risk

The local authority (LA) then weighs up the risk from any hazard that might affect the potential occupants. The LA considers the most practical solution and the age of the building. It then takes the most suitable form of action which will be one of the following:

- ▲ serve an improvement notice
- ▲ make a prohibition order
- ▲ emergency action
- ▲ serve a hazard awareness notice
- ▲ demolition orders
- ▲ clearance

To prevent any of these actions, the landlord should inspect the entire property room by room to check if there are one or more of the 29 hazards and decide on remedial work to be done to reduce risks as low as reasonably practicable. The landlord should keep a record of work done and record dates when work(s) are finished, then re-inspect property and check that hazards have been removed/minimised.

## Hazards

The HHSRS identifies 29 potential housing hazards. For full details of all hazards please visit this link: [www.communities.gov.uk/documents/housing/pdf/150940.pdf](http://www.communities.gov.uk/documents/housing/pdf/150940.pdf)

Of all the potential hazards, research by the Scottish Office Central



Research Unit identified the highest risks to health in housing to be associated with hygrothermal conditions (dampness, mould and cold); radon; house dust mites; environmental tobacco smoke; carbon monoxide; security and the effects of crime and lead. Other important hazards are fire, falls, heat and overcrowding.

▲ **Dampness and mould-**

(Hygrothermal conditions): These are factors that affect thermal comfort – temperature, humidity and air movement. Inadequate heating, insulation and ventilation cause condensation, which encourages growth of mould, fungi and other microorganisms. Many moulds are allergenic and provide a food supply for house mites which are also potential allergens. At certain stages, some fungi become toxic. Mould allergy is a recognised cause of asthma. Studies have shown that damp housing can cause aches and pains, nerves, diarrhoea, headache, respiratory problems and other illnesses among children.

▲ **Cold:** In England, it is estimated that around 1 in 18 dwellings are below acceptable energy efficiency standards and there is evidence to suggest that vulnerability to cold is greater in homes with inadequate insulation/home heating. Around 20,000 deaths a year are attributed to the direct effects of cold – improving domestic energy efficiency and affordability of home heating will have appreciable benefits to health in terms of mortality and morbidity.

▲ **Radon:** is a radioactive gas which enters buildings from underlying soil and rock. When radon and its decay products are inhaled, they irradiate tissues in the body especially the lungs. This could result in lung cancer,

leukaemia and skin cancer. Radon has been estimated to be responsible for 2,500 deaths per year in the UK. Engineering solutions are possible to reduce radon levels inside the home.

▲ **House dust mites:** The growth of mites depends on the combination of temperature and humidity and on the age, cleaning and use of soft furnishing. Mite allergens may trigger allergic reactions such as asthma. Preventative measures include thorough cleaning.

▲ **Environmental tobacco smoke:** The risk of lung cancer among non-smokers passively exposed to tobacco at home is estimated to be 30% higher than the risk to non-smokers not exposed. A quarter of all lung cancers occurring in non-smokers which result in around 400 deaths per year in the UK, are attributable to ETS passive smoking. Ventilation and air cleaning devices can help with prevention.

▲ **Carbon monoxide:** is a colourless, odourless gas produced by incomplete fuel combustion and is extremely toxic. Most fatal accidental poisoning is due to fires, gas boilers etc. In addition to fatal poisoning, exposure can cause long term damage. Hazards can be reduced by correctly installing and maintaining cooking and heating appliances and ensuring there is appropriate ventilation.

▲ **Security and the effects of crime:** The risks to health from crimes in the home range from direct injury to victims during burglaries, shock and resultant depression; and for non-victims, fear of burglary particularly for women and the elderly. Some risk of crime can be alleviated by design and infrastructure improvements.

▲ **Lead:** The main sources of lead are: car exhaust fumes (less so these days), leaded paint and lead pipes for drinking water. There is epidemiological evidence of an adverse effect on neurological development in childhood. Subtle intellectual impairment occurs with chronic low level exposure.

▲ **Fire:** According to communities.gov.uk, there were around 45,000 fires in dwellings, resulting in 308 deaths and 8,900 non-fatal injuries in 2010-2011. As well as burns, deaths can be caused by gas, smoke or carbon monoxide poisoning. Sources of ignition can be cooking appliances or electrical equipment. Cookers should be sited away from flammable materials, wiring should be properly installed, maintained and regularly checked and tested, and buildings can be designed and constructed to limit the spread of fire. Smoke alarms should be installed and maintained.

▲ **Falls/trips:** A high proportion of home accidents are among children and the elderly (risk increases with age). In England, there are around 500 deaths, and 230,000 injuries a year from falls on the stairs. Trips accounts for 11% of non-fatal accidents and 2% of deaths in the home. Apart from increasing age, characteristics of the dwelling, poor design and maintenance is a factor in many falls.

▲ **Heat:** Higher indoor temperatures may carry greater risks to health and could result in heat morbidity/mortality.

▲ **Overcrowding:** overcrowding is thought to increase vulnerability to infections such as tuberculosis and diarrhoea.

**For further information and references contact London Hazards**

**Factsheets online [www.lhc.org.uk](http://www.lhc.org.uk) London advice 020 7794 5999**



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