

THE DAILY HAZARD

Photo: Mick Holder LHC



Fernanda Giannasi, Brazilian Factory Inspector, said that an asbestos ban in Europe would save countless Brazilian lives in passionate plea to lobbyists night before the rally.

Photo: Jean Francois



International asbestos expert Barry Castleman, in calling for a global ban, horrified his listeners with his account of the industry and the ill-health of those involved in it.

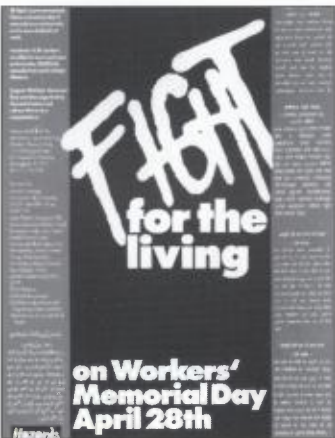


Photo: Alexis Marion



Tom Mellish and John Flannigan listening to asbestos victims calling for an immediate ban.

Photo: Jean Francois



Tenants groups and building workers outside Westminster Central Hall.

BAN ASBESTOS - NOW

This was the demand of the Trade Union Congress's recent lobby of parliament.

Tenants' groups, asbestos victim support groups, trade unions, the Construction Safety Campaign and many others lobbied their MPs for an immediate asbestos ban and better controls on asbestos already in buildings. The ban was promised by the Labour Party after the last General Election.

Eight European Union member states have already banned asbestos. The Canadian government, because it wants to sell asbestos to developing countries has said that it will call on the World Trade Organisation to take legal action against countries banning asbestos. The Canadians themselves have not taken legal action against any country in the international courts. Angela Eagle MP and Peter Skinner MEP said that they would ensure that any legislation banning asbestos could not be challenged by the Canadian government.

At the rally held in Westminster Central Hall Alan Dalton, National Health and Safety Co-ordinator of the Transport and General Workers Union said: 'The government must stand up to these threats and ban asbestos now. This would send a message to the rest of the

world that we will no longer import this poison and we will fight in the international courts if you try and stop us from achieving this.'

Concern was voiced about the activities of the European Commission's Technical Committee on Toxicity. It has been reported that the members of this committee have little occupational health and safety experience. The Committee admitted that there is no safe level of exposure to white asbestos but contradicted itself by saying that asbestos is safe to work with using current controls.

'They have little understanding of the real way asbestos is treated in most workplaces,' said George Brumwell of the construction workers union UCATT. The fact that the Health and Safety Executive is prosecuting Andrew and Neil Medley, of Medleys Ltd., for employing 14 year-old boys, without any protective equipment, to rip asbestos out of buildings underlines the deadly warning given by George.

Peter Skinner expressed extreme disappointment and anger that the European Committee had provisionally rejected arguments for a ban and said that he will be challenging the Commission to reject the Committee's position and to ban the marketing and

use of white asbestos throughout Europe. 'If the European Technical Committee is correct in saying that the substitutes for white asbestos are as dangerous as asbestos then we should be banning the substitutes too' said Tony O'Brian of the Construction Safety Campaign.

Peter Skinner supported the Construction Safety Campaign's demand for a zero legal level of exposure to asbestos and full analytical surveys of buildings so that the presence of asbestos can be registered. He said, 'Once we have a ban, the next stage is to have a comprehensive survey of public buildings to find out where asbestos exists and then take measures to reduce any risks.'

Alan Grant, TUC delegate on the Health and Safety Commission (HSC), said that compromises were sometimes the only way of securing some progress on issues. But Alan also said strong lobbying of the HSC members and politicians from campaigners does affect their decisions.

Both Angela Eagle and Peter Skinner said it was necessary for everyone to keep lobbying and campaigning to ensure the ban is achieved. 'We must act to stop the rising death toll, and I urge all those campaigning for a ban to keep up the pressure' said Mr Skinner.

Driver's train sights on risk assessments

'Several years ago, after being involved in a series of strikes we won the right to a 37 hour week, no strings attached - it's never happened - and if management find out I'm talking to a reporter I'm up for the sack' said one train driver. 'What we want is straightforward; a 37 hour working week, shorter working days, breaks based on driver's needs not based on train schedules, stop all 11 hour shifts and roster co-drivers to work with drivers working 9 hours or more for the last couple of hours of their shift. If these safety measures are ignored by management then every train that pulls out is a disaster waiting to happen.'

Working up to 66 hours in any seven day period, working up to 13 days consecutively, working as many as 11 hours out of 24, having to work up to 7 hours without a break, having to travel up to 90 minutes to get to work and other 90 to get home and being responsible for the lives of up to 1200 people for every minute of your working day. That is the work pattern of most train drivers in London. It

is a system which leads to driver fatigue.

Managers of South West Trains (SWT), a Stagecoach operation, initially told ASLEF and RMT (train driver's unions) that risk assessments were unnecessary because working hours had been vetted by the Health and Safety Executive (HSE). Jane Lees for SWT, denied this and said, 'We are satisfied that our operation is safe, the hours we expect our drivers to work have been risk assessed and the output shared with the HSE. I would add that the risk assessment includes the working of rest days.' She emphasised that drivers were not obliged to do overtime. One of their drivers said, 'Why are they refusing to let us see risk assessments then? I thought that was what risk assessments were for so we'd know what the health problems are and what our bosses are doing to keep us and the passengers safe.'

The Daily Hazard (DH) approached Jenny Bacon, Director General of the HSE, and asked her to comment on this state of affairs. The HSE

said, 'a reply will be sent shortly'. As we go to press, the DH is still waiting for her explanation.

An RMT executive member said, 'there is some confusion about risk assessment that worries us as a union. SWT restructured our drivers' hours and rosters and what they were looking for was driver flexibility in terms of daily hours. The quid quo pro for drivers being flexible was longer and more frequent quality days off. It's not happening. They let too many drivers go and those that are left are working up to 11 hour shifts for as long as thirteen days at a stretch so that SWT can cover the timetabled trains. *They might have risk assessed the working hours of the agreed proposals but as far as I know there is no risk assessment of the real practices.*

ASLEF's spokesman, John Richards said, 'These working arrangements are the result of an industrial agreement which has been vetted by the Health and Safety Executive.' when asked if this absolved SWT from complying with the law and

carrying out risk assessments on Driver Fatigue, John said, 'I suppose not.'

Driver fatigue is a serious hazard to train users. Drivers risk losing concentration, becoming drowsy and losing dexterity in the short term, with more serious conditions of hypertension and breathing disorders in the long term (Stoohs, et al 1995). For drivers, incidents and accidents arising from driver fatigue can also lead to loss of job, possible imprisonment for breaches of safety law, defaulting on mortgages and family breakdown.

Speaking for Capital Transport Campaign (CTC), the voluntary transport watchdog, Louise Sanguinazzi was scathing about SWT's drive for profit. 'Drivers work longer hours so the company can avoid cancelling trains and having to pay hundreds of thousands of pounds in fines to the franchising director for service failures. What should be of paramount importance is driver and passenger safety not profit.'

HSE and Council stall on sick building

Sore throats, headaches, dry eyes and other health problems have been a regular thing for as long as staff can remember at Tower Hamlets Council's (THC) Gladstone Place building. Trade union safety reps are engaged in a long and difficult fight for improvements in this 'sealed' building where, due to cost cutting by the Council, the air conditioning system designed for the building was never installed even though the building was completed nine years ago.

Council staff began to complain as soon as the building was occupied and in 1995 the Health and Safety Executive (HSE) served an Improvement Notice on THC to draw up an action plan for improvements at two of their buildings, Gladstone Place being one of them. The action plan was not implemented by THC and staff have suffered appallingly as a result.

A survey by the Council's Health and Safety Department in 1996 revealed 'several

serious breaches of the Workplace Regulations' and included an acknowledgement that air movement rates did not meet the HSE's guidelines. Humidity was too low and carbon dioxide levels were too high. Combined with temperatures, in winter, of 80° Fahrenheit (F) plus and, in Summer, of 100° F plus these conditions result in headaches, nausea and irritability for staff in the building.

In August 1997 Mark Johnson, a newly appointed UNISON health and safety representative contacted London Hazards Centre (LHC) for advice. Mark told the Centre, 'Conditions in the building are unbearable. People often feel unwell but are afraid to go sick as it could affect their chances of keeping their job. No one seems to be treating the matter seriously despite the enormous toll on people's health.' The LHC encouraged Mark to press for action, involve the UNISON Branch, keep the issue alive with the HSE and continue supporting staff.

An Environmental Conditions Survey in October 1997 at Gladstone Place by Adrian Grieves, UNISON's Branch Safety Officer, that 85% of staff (average age 35) suffered from feelings of lethargy at work, 83% suffered regular headaches and 80% regularly experienced dry throats. 60% of respondents had more serious symptoms of dry and itchy eyes and blocked/runny noses. However Adrian was told by the HSE, when they met with the Council's Corporate management, that his presence at the meeting was 'not appropriate'.

Despite failing to involve safety reps in line with instructions by the HSE's Director General, Jenny Bacon, inspectors served an Improvement Notice in January 1998 requiring the Council's Action Plan to be implemented. This shocked already worried workers at Gladstone Place. Conditions have not improved at all since the HSE's involvement two years ago. The building remains

unventilated, uncleaned and polluted by dust mites and pigeon excrement, rotting carcasses and feathers.

Mike Merritt from LHC addressed a meeting of Gladstone Place workers. Questions were asked about sick building syndrome and pregnancy and the point was made that a number of staff members have developed serious respiratory complaints since working in the building.

Staff are now considering what they must do next to try and get a work environment that at least meets minimum legal standards. The HSE, true to form, is being less than vigorous in enforcing the law and continues to allow this criminally negligent employer to cause illness to staff to the detriment of their quality of life both in and out of work. UNISON would like to hear from people who no longer work in the building but who developed asthma while working there.

What is indoor workplace air pollution?

Indoor air pollution can arise from construction materials used in the building, the furnishings, fixtures and equipment in the building, the land buildings are on or from materials used at work (wood dust, cement dust, gluteraldehyde fumes) or created during the production process (welding gases, oil mists, solvent fumes, ozone).

How does indoor air-pollution affect the body?

The effects of indoor air pollution vary, the skin, eyes, nose, throat and lungs can be affected, depending on the pollutant. Flu-like symptoms may also be experienced together with blocked or runny noses, occasionally nausea may accompany these symptoms. In the long term, when people are dosed up with polluted air daily, the above symptoms become more serious and permanent injury can result.

The Health and Safety Executive (HSE) estimate that each year there are over 1000 new cases of asthma caused by exposures at work. These figures are based on returns from a number of health studies being conducted during the 1990's. It is believed by the HSE that the true figure is probably at least three times this. Additionally, the HSE report that 70,000 people in the UK believe that they have asthma caused, or made worse, by substances breathed in at work.

Health risks from air pollution are not simply limited to bronchial problems. Chemical dusts and fumes find their way into the body via exposed skin surfaces as well as the lungs, causing diseases which vary from permanent painful and irritating skin conditions, central nervous system damage, brain damage, liver damage, cancer, damage to eyes and straightforward poisoning.

Lifelong ill-health can result from being sensitised to naturally occurring substances such as ozone; this gas accumulates in workshops or offices where there is equipment that uses electrostatic discharges (electric arc welding in workshops and, in offices, photocopier and laser printer use). There is the possibility of developing a condition called Multiple Chemical Sensitivity (MCS) which causes the body to react badly to a range of chemical exposures at very low doses.

The workplace

Manufacturing processes and production areas are neither the only or most typical places of air pollution. A group of secretaries and their

manager were seriously and permanently affected after breathing formaldehyde fumes and wood dust because their employer had a defective ventilation system that simply transferred the dust and fumes from the workshop to their office. In another workplace, workers suffered low level carbon monoxide poisoning (splitting headaches) when car exhaust fumes from the car park were sucked into the ventilation air-intake and blown throughout the building.

The Law

'Effective and suitable provision shall be made to ensure that every enclosed workspace is ventilated by a sufficient quantity of fresh or purified air'. (Regulation 6 of the Management of Health, Safety And Welfare Regulations 1992)

Employers' legal duty arises under Section 2 of the Health and Safety at Work Act 1974 which requires them to do all they can to provide a safe system of work and a safe working environment. Employers may have to conduct a risk assessment either under Regulation 6 of the Control Of Substances Hazardous to Health Regulations 1995, if the polluting substance(s) is used in the workplace or results from a manufacturing process. Regulation 3 of the Management of Health and Safety at Work Regulations 1992 places a duty on the employer to make a risk assessment if the substance arises from some other source.

Ventilation

Ventilation may be either dilution ventilation or exhaust ventilation. Dilution Ventilation, at its worst ensures that the pollution is evenly distributed throughout the workplace, e.g fans mixing up the air and moving air around within an airless workplace. Local exhaust ventilation (LEV) ensures pollution is removed at its point of generation.

If there is general exhaust ventilation the air in an office or factory is replaced with pure air; three complete changes of air/hour is the European standard deriving from, 'The Guidelines for Ventilation Requirements in Buildings' published in 1992 by the Commission of European Communities. Further guidance on air flow rates is given by the HSE.

Rooms housing office machinery such as photocopiers or workshop

machinery producing dust or fume or rest rooms where tobacco smoking is allowed, should have separate extract ventilation systems. Air inlets for the ventilation system should be sited to avoid introducing pollution from outside the building.

Controlling dust by cleaning

The most effective action is to remove the source of risk; this is done by identifying what is polluting the air (fumes, dusts, tobacco smoke, oil mist, etc.) and removing that source from the environment by elimination, encapsulation or by LEV. But keeping the workplace clean is an important control measure for dust hazards.

Inhalable dust: This is visible dust which is collected in the saliva and mucus in the mouth, throat and nose and either expelled from the body or ingested. Dust contaminated by toxins can find their way into the digestive tract and on into the blood stream and be distributed around the body and its organs.

Respirable dust: Is not visible to the eye nor to some optical microscopes. The dust by- passes the body's filters and enters the lungs and lodges in the gas exchange cells of the lung (alveoli). Toxins may be taken into the bloodstream this way too. Rory O'Neill, in his book 'Asthma at Work', says that the current HSE exposure level of five milligrams of dust per cubic metre of air we breathe is more than twice the level that the nose, the bodies' front-line air filter, can cope with. Impurities can be expelled from the lungs by tiny 'hairs' or cilia which waft impurities out of the lungs and up the windpipe towards the mouth. Often the impurities dissolve in the mucus and get into the bloodstream before they are expelled.

Normal vacuum cleaners, at best, only remove inhalable dust. Machines capable of removing respirable dust from the environment must be fitted with a high efficiency particulate air (HEPA) filter. Some domestic machines, such as the 'Henry' or the 'Dyson' can be equipped with such filters. Filters must be renewed regularly to remain effective.

Workplace Action

- Contact your trade union safety representative.
- Ask your employer to have air samples analysed
- Make a record all instances of illness in the accident book at work

ensuring that they are recorded as work related.

- Alert your doctors to the relationship between workplace air pollution and any illness.
- Check the employer has arrangements for the effective planning, organisation, control, monitoring and review of preventative and protective measures.
- Inform members about taking civil action to pursue claims for damages from the employer. A civil action known as 'the Walker case' set a precedent that where an employer re-exposes an employee to working practices that have already caused injury or illness the employer is automatically negligent.
- Use grievances procedures to expedite negotiation where managers block or are hesitant to deal with the issues... take each complaint through to the final stage and register a 'failure to agree' where a completely satisfactory result is not obtained.
- provide HSE Inspectors with copies of inspection reports/surveys/illness and sickness records and other documentary evidence of your employer's breaches of law.

Further information

Asthma At Work – Causes, Effects And What To Do About Them
Rory O'Neill, ISBN 1-874751 02 1 (£6.00)
Order from 01442 276 5695

Sick Building Syndrome – Concepts, Issues And Practice
ED Jack Rostron ISBN 0-419-21530-1
(order from your local bookshop or library)

Industrial Ventilation
ISBN 0-936712-79-1
(order from your local bookshop or library)

Sick Building Syndrome – Causes, Effects And Control.
LHC Handbook ISBN 0-948974-06-0.

Call 0171 267 3387 to purchase or obtain from your library.

Controlling Asthma At Work
HSE Books ISBN 0-717606-61-9.
01787 881165 to buy

Magnetic field mapping

Strong electromagnetic fields are a cause of concern. The Swedish recommended safe level of 2.5 milligauss (its equivalent in Tesla, another unit of measurement, is 250 nanotesla (nT)) is exceeded time and time again at work and in the home.

We mapped the magnetic fields in the office where we work in at

the London Hazards Centre after obtaining a calibrated field density meter and received some surprises.

The scale of the meter starts at 0 Nanotesla and rises to 2400 nanotesla. The readouts are divided into three bands: firstly those levels considered as safe by leading researchers (250 nanotesla and under): Levels

that are under discussion as probably hazardous range from 250 nT to 650 nT. Levels that are considered hazardous by leading researchers range from 650 nT to 2400 nT.

On our newest low radiation colour monitor the field strength was 200 nT at 25 cm and non-existent at 40cm. The density exceeded 2400 nT and went off the scale at 5cm. This position was reflected along the sides of the monitor but zero density was not reached until 40cm at the back and along the top.

Readings for the oldest colour monitor were higher. The fields did not diminish below 100 nT until we got to 75 cm and was still flickering at that level at 90 cm. The probably hazardous densities (in excess of 650 nT) was not cleared until we got to 45 cm at the front and 55cm at the back and sides.

An elderly monochrome (black and white) monitor tested between the two above.

The photocopier generated hazardous densities up to 20cm from the copier at waist height... how do you like your eggs fried! On the those awkward jobs, 20 copies of minutes, discussion papers, proposals etc. When in front of the copier for 15 /20 minutes people were observed to remain in the hazardous range for the whole time; often

leaning against the copier at a point at which the hazard reading had gone off the scale. Stand at least a metre away when the machine is running.

The magnetic fields of the microwave did not reduce to levels currently considered safe until the meter was held a metre from the machine, when it was operating.

The other piece of equipment that sent the meter off the scale at the top end was the telephone handset. The permanent magnetic field density is zero all the time the phone is static relative to the meter (or your ear) but goes off the scale the moment you move the 'phone handset in relation to your ear (and your brain).

Eliminating magnetic fields is almost impossible and so our response has been to reduce exposure by advising staff of safe distances. Workers who sit with their heads only centimetres away from the rear of monitors are particularly at risk. Arrange office workstation accommodation so that people are at least 90 cm from the back or sides of monitors and only approach copiers, laser printers closer than 1 meter in order to inset paper or documents. When holding the phone against your ear try not to move it too much or too often.

OUT IN THE AUTUMN

Chemical Hazards Handbook

The Centre's next handbook is scheduled to appear in Autumn 1998. It will be about chemicals at work and is aimed at safety representatives and others who do not have a chemistry background. It is intended to provide a broad understanding of how to deal with issues of chemical safety at work

Chapters will cover how chemicals act, how to measure the danger, what legislation applies, the prevention and control of hazards and campaigning and taking action. The book will not be a list of hazardous chemicals but will give safety representatives the tools to interpret information about chemicals and form a plan of action to protect their members. It will enable representatives to assess the reliability of chemical information provided by employers, manufacturers and suppliers, and expert sources and the safety measures which are based on this information.

Details of pricing and special pre-publication offers will appear in the next issue of the *Daily Hazard*.

Now you can search

LHC DATA ON THE WEB

at www.lhc.org.uk

Our Web site contains two databases:

- HAZLIT our library catalogue
- HAZTEXT

full text of most of our books, factsheets and newsletters.

If you're an affiliate/subscriber you have free access to these databases.

E-mail <lonhaz@mcr1.poptel.org.uk> for your password. Organisations with which we exchange information can also get access.

We'd like to thank UNISON and poptel whose support has allowed us to set up this site



L o n d o n
H a z a r d s
C e n t r e

Interchange Studios
Dalby Street
London NW5 3NQ
Tel: 0171-267 3387
Fax: 0171-267 3397
lonhaz@mcr1.poptel.org.uk
www.lhc.org.uk

London Hazards Centre receives grant funding from the Bridge House Estate Trust



This organisation is funded by London Boroughs Grants

Registered Charity No: 293677

RMT Safety Rep leads the way on training

Denys Rama was blocked by his employers, South West Trains (SWT) from doing the second stage of his TUC safety representatives training. Denys isn't one to give in easily, so he took annual leave, went on the course and then took SWT to an Industrial Tribunal to get compensation. He won and they lost, costing SWT far more than it would of cost had they let him go on the course in the first place.

In delivering his Appeal Court Judgement Justice Forbes said that a safety representatives right to training under regulation 4 did not limit the safety representative to learning only sufficient to fulfil their functions under that regulation. He went on, 'If a request by the appropriate

safety representative is for time for such training as is reasonable in all the circumstances, as opposed to unreasonable, there is a mandatory duty upon the employer to give the safety representative the necessary time off with pay in order to attend the course'. What this means is, even though an employer thinks more training is unnecessary, if that training will help the representative to do their job, the employer has to give paid time off work for that training.

So there you have it all you safety Reps - don't take 'no' for an answer, get on those TUC courses and if management are obstructive take them to a tribunal.