

THE DAILY HAZARD

Scene set for improvement in safety reps' rights on 20th anniversary of Safety Reps Regs

The Safety Representatives and Safety Committees Regulations (SRSC) 1977 came into force, twenty years ago, on 1 October 1998. They gave recognised trade unions the legal right to appoint safety reps and provided reps with wide-ranging powers. There are 200,000 union safety reps in Britain and research shows that workplaces with trade unions and safety reps are safer workplaces. The Trades Union Congress (TUC) claims that safety reps have prevented 2.5 million major injuries over the last 20 years.

Victimised UCATT safety rep vindicated

Unfortunately, many employers give safety reps a hard time. Dave Smith, an engineer with fifteen years experience in the industry started work for Costains, the construction company, at their Tesco Goodmayes site, Essex, on 15 June. He was employed through an agency, Chanton, who sent him to Costains for interview and then administered his wages after his appointment. On 10 July, the building union UCATT appointed Dave as a safety representative. Two weeks later, after raising health and safety concerns, he was

sacked and given five minutes to get off site.

Costains claimed that Chanton was Smith's employer but, on 16 September, an Industrial Tribunal (IT) ruled that Costains was the employer. This destroyed Costains case and UCATT believes it is a formality that the IT will rule that Smith was unfairly dismissed when it meets again in January. Dave has meanwhile found work elsewhere and has decided not to go back to Costains (the IT rules meant that he could have been reinstated). UCATT organiser Ron McKay said "I am totally confident that we will win the Tribunal in January, and it will give us the opportunity to sort out the compensation that is due to Dave. Now workers who are placed on sites through labour agencies should be aware of findings of this Tribunal. We want building workers to realise we will defend any member victimised for being a safety rep. Safety reps save lives."

TUC makes "PINs" official policy

Meanwhile, delegates at the Trades Union Congress in September unanimously agreed a motion instructing the General Council: "to allocate sufficient resources for a campaign to secure increased rights and protection of safety representatives, including:

- roving/area safety representatives
- the right to recognition as a safety representative, with rights to hold regular inspections, in line with the Safety Representatives and Safety Committee Regulations 1977, irrespective of whether the

union has full trade union recognition;

- the right to stop the job and the additional function of issuing Provisional Improvement Notices – PINs (issued by safety representatives in Australia where there is a safety dispute with the employers – if there is no resolution after 14 days a safety inspector visits the workplace and adjudicates on the issue); and
- a speedy system for dealing with cases of victimisation over health and safety, and for the right to reinstatement!"

The TUC will use European Health and Safety Week (19-25 October) to launch a new campaign calling on safety reps to make the most of their rights and urging workers to use their safety reps.

Government review soon under way

As pressure mounts to improve safety reps' rights, safety reps should be aware that the Health and Safety Commission (HSC) is soon to begin a review of "health and safety consultation and representation arrangements". The HSC will be issuing a consultative document and commissioning research but, at the beginning of October, was still waiting for the go-ahead from government ministers. If there is much more of a delay, safety reps may like to check on the current situation by contacting Alan Bell at the Health and Safety Executive, Rose Court, 2 Southwark Bridge, London SE1 9HS – tel: 0171-7176673. Since the Labour government was elected last year, ministers and the Health and Safety Executive (HSE) have publicly emphasised the

important role that trade union safety representatives play in promoting workplace health and safety. It is to be hoped that the government will take on board the arguments set out by the unions and modify existing legislation accordingly. Moreover, the incoming "Fairness at Work" legislation is likely to result in an increase in the number of workplaces with trade union recognition and a consequent increase in the number of safety reps.

Safety representatives and safety committees, 3rd edition, 1996. £5.75 for single copy, £40 for ten copies, from HSE Books on 01787-881165.

Workers use your safety reps; safety reps use your rights. Single copies free with s.a.e. from TUC, Congress House, Great Russell Street, London WC1B.

Making safety reps more effective. report of a conference, held at Congress House on 5 March 1998. Free from London Hazards Centre.

Safety reps in action, March 1998, £2.95 (£10 non labour movement organisations) from Labour Research Department, 78 Blackfriars Rd, London SE1 8HF. Tel: 0171-928 3649.

Contact with representatives and employees at visits and disclosure of information. HSE Operational Circular OC 111/1. This is an internal HSE document giving guidelines to inspectors. Copies are available to the public from HSE offices under "open government" rules.

SPECIAL OFFER

Buy our new **Chemical Hazards Handbook** (out in January) and:

- get any of our other publications at half price!
- or take all other publications for only £20!

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Asbestos ban breakthrough

Photo: Mick Holder/LHC



George Brumwell (right), UCATT General Secretary and TUC Commissioner on the HSC and Ian McDeson of the Construction Safety Campaign (CSC) at the CSC lobby for an asbestos ban, 18 August 1998

On 16 September, the European Commission's Scientific Committee on Toxicity, Ecotoxicity and the Environment (SCTEE) finally concluded that chrysotile (white asbestos) is more harmful than the available substitutes. This clears the way for a Europe-wide ban on the use of asbestos and the European Commission is now expected to bring forward proposals for such a ban.

This was the signal the British government was waiting for to move towards an asbestos ban in the United Kingdom. On 17 September, the Health and Safety Commission published a consultative document proposing amendments to the Asbestos (Prohibitions) Reg-

ulations 1992. The HSC claims to be going ahead in the light of the scientific evidence confirmed by the Department of Health's Committee on Carcinogenicity which, in July, concluded that substitute fibres posed less of a risk to occupational and consumer health than chrysotile.

The consultative document proposes "a prohibition on the importation, supply and use of chrysotile asbestos, except in certain well defined and limited cases". The proposed amendments make the import of chrysotile punishable under the Customs and Excise Management Act 1979. Part IV, Section 50 of the Act allows for fines, imprisonment or both.

a) on summary conviction, to a penalty of the prescribed sum or of three times the value of the goods, whichever is the greater, or to imprisonment for a term not exceeding six months, or to both; or

b) on conviction on indictment, to a penalty of any amount, or to imprisonment for a term not exceeding 2 years, or to both. The consultation period lasts until 17 December 1998.

Proposals for amendments to the asbestos (prohibitions) regulations 1992: free from HSE books on 01878-881 165. Also at the HSE's Web site at <http://www.open.gov.uk/hse/c/ondocs>

Opinion on chrysotile asbestos and candidate substitutes expressed at the 5th SCTEE plenary meeting, Brussels, 15 September 1998. Available at the European Commission Website http://europa.eu.int/comm/dg24/health/sc/sct/out17_en.html

Opinion of the Department of Health's Committee on Carcinogenicity, available on the Department of Health's Web site at <http://www.open.gov.uk/doh/coc.htm>

Alternatives to asbestos, factsheet, London Hazards Centre. Free with s.a.e.

Asbestos Hazards Handbook, London Hazards Centre. See publications list on page 4.

Tower Hamlets sick building success

In April this year, we reported on health problems experienced by staff working at Tower Hamlets Council's Gladstone Place building. Trade union safety reps fought a long and difficult fight for improvements in this "sealed" building, where the air conditioning system designed for the building was never installed. The London Hazards Centre provided advice, information and encouragement through our advice line and at a meeting of the Gladstone Place workers.

Adrian Greaves, UNISON's branch health and safety officer, told the Centre that concerted pressure in the last year has produced results: windows that did not open have been replaced, mechanical ventilation has been installed in internal offices and a full programme of modifications is due to be concluded by March 1999. Staff feel much better but 40 members of the union are jointly pursuing Tower Hamlets Council for compensation for the ill-health they suffered while working in the building.

See Daily Hazard 58, April 1998.

Dates for your diary

10 November 1998
National Asbestos Conference. Hidden Hazard: Victims Support/Which Way Forward?
Clydebank Town Hall. Details from Tommy Gorman, Welfare Rights Representative, Mansfield House, Strathleven Place, Dumbarton G82 1BA. Tel: 01389-738 369.

26 November 1998
An occupational health strategy for Great Britain in the next millennium
HSE, Rose Court, Southwark Bridge, London. This is one of a series of meetings around the country which the Health and Safety Executive has organised as part of a consultative process. The consultative document, "Developing an occupational health strategy for Britain" is available free from HSE Books on 01787-881 165. You can also access it at the HSE Web site at <http://www.open.gov.uk/hse/wds/trat.html>

12 January 1999
Healthy Workplaces: Managing Solvents
At TUC, Congress House, Great Russell Street, London WC1. Organised by the TUC, in conjunction with the HSE, the Environment Agency and the Solvents Industry Association as part of the HSE's Good Health is Good Business campaign. Registration £75.

26-28 March 1999
From Charter to Action: National Hazards Campaign conference
For more details, write to Hazards 99, c/o Fire Brigade Union, SW Regional Office, 148 Muller Road, Horfield, Bristol BS7 9RE. Contacts: Pete Fryer 0117-957 3649 or Judith Connor 0117-931 2121 x 273. Email: peter_fryer@bristol-city.gov.uk

17-19 September 1999
7th European Work Hazard Conference, Edinburgh.
For more details, write c/o Lothian Trade Union and Community Resource Centre, Basement, 26/28 Albany Street, Edinburgh EH1 3QH. Tel: 0131-556 7318.

WORKING TIME Part 1: Shift work and night work

This is Part 1 of a two-part factsheet on working time. This Part deals with the health effects of shift work and night work and how to avoid them. Part 2 will deal with long working hours and the law and organising, especially the Working Time Regulations which came into force on 1 October 1998.

Shift work and night work are carried out for technological (some processes require continuous production or more time than a normal working day), economic (obtaining the most use of capital equipment), or social reasons (health care, emergency, travel, information and entertainment services; energy and water supply). Only some of the social reasons are completely justifiable and many of the other types of night work and shift work could be reduced or eliminated if the maintenance of the health, safety and quality of life of workers was a primary objective of economic activity.

Who works shifts?

According to the Labour Force Survey of Spring 1997, 3.6 million UK workers usually worked shifts, some 14 per cent of all people in employment. A further unknown number took part in shift work from time to time. Shift work was only slightly more prevalent for men than for women. It was most common among plant and machine operators (over 30 per cent of men and 20 per cent of women in the sector) and personal and protective services (more than half of the men and about 30 per cent of women). By far the most common occupational group of women working shifts was nurses. Double-day and continuous systems were about equally common. Some eight per cent of workers were on permanent nights and four per cent worked split shifts. Only about 10 per cent of shift workers like it according to a Health and Safety Executive review. Another 20-30 per cent of workers do not like it and the rest just put up with it.

Health effects of shift work and night work

Human beings tend towards daytime wakefulness and sleep at night. The body operates on a 24 hour clock, on cycles known as circadian rhythms. Disruption of these rhythms is considered to be the major cause of the harmful effects of shift work, even if absolute proof is lacking so far. Complete adjustment to changing cycles is rare and the ability to do so declines with increasing age. The major health effects are:

- Fatigue and sleep deficits. Workers who have to sleep by day often experience difficulties because their body clock does not adjust completely and they are more prone to disturbance. Both the quality and duration of sleep are affected. Sleep deficit and fatigue can build up and affect work, e.g. through the increased possibility of accidents.
- Gastrointestinal disorders. Irregular food intake associated with night and shift work can lead to stomach complaints. Some studies have found that permanent shift workers are more than twice as likely to suffer from peptic ulcers as day workers. Another study showed that workers on permanent shifts develop peptic ulcers after about five years on average.
- Cardiovascular disorders. A significant relationship between shift work and heart disease has been reported in a high proportion of studies, especially the more modern ones.
- Neurological disorders. There is accumulating evidence for an increased incidence of neurological symptoms among shift workers, developing into mental illness. One study reported the average onset period for mental illness in shift workers as less than four years.
- Menstrual disorders. Some studies report a link between shift work and disruption of the menstrual cycle.
- Effects also arise from the impairment of conventional social and family life, resulting in increased substance abuse and the breakdown of marital and other relationships.

Difficulties are particularly acute for women with child-care responsibilities.

In recent years, there has been a growth in 12 hour and longer shifts rather than the more traditional 8 hour period. Much research effort has gone into determining whether or not this imposes extra health effects with inconclusive results to date. It would seem that circadian disruption, fatigue and sleep deficit would be exacerbated by a 12 hour system.

Other factors need to be considered, e.g. exposure to toxic materials where limits appropriate for 8 hours would no longer be safe for 12 hours.

Guidelines for minimising the health effects of shift work

A vast amount of literature has been published on which shift systems are least harmful, without any clear-cut conclusions being reached. Tentative proposals advocated by the European Foundation for the Improvement of Living and Working Conditions are:

- permanent nights should be minimised
- only 2-4 shifts in succession should be worked on permanent nights
- short intervals between two shifts should be avoided with at least 24 hours, and preferably 48 hours, between sets of night shifts
- at least some weekends should be completely free
- compressed working periods, say of 8 or more continuous working days, should be avoided
- the length of the shift should be related to the task to be performed
- the night shift could be made shorter than the other shifts
- forward rotation (mornings, then afternoons, then nights) is preferred for continuous shifts
- morning shifts should not start too early
- rotas should be as regular as possible
- there should be some opportunity to swap shifts and change handover times
- short-term rota changes for operational reasons should be avoided
- good notice should be given of any changes in shift patterns

Other conditions which should apply to shift and night work are:

- availability of hot food and drinks, rest areas and first aid
- safe travel to and from work at unusual hours
- same access to training as other workers
- access to union representation including time off in lieu to attend meetings



- provision to return to regular day work without penalty; this is especially important for older workers

A huge amount of advice is available for shift workers on how to cope on a personal level with the demands of the job. The European Foundation offers 36 tips on dealing with sleep problems, 12 guidelines on eating on shift work, six rules for physical fitness and 11 ways for keeping social contact. Basically the advice is to follow as conventional, regular and moderate lifestyle as the circumstances allow. The advice attempts to fit the worker to the job rather than the other way around and is therefore open to fundamental criticism. As in all other areas of health and safety, the essential onus in ensuring that safe systems of work are brought into operation lies with the employer.

References

Hours of Work.

P. Knauth, Encyclopedia of Occupational Health and Safety, chap. 43, 1998, International Labour Office.

Guidelines for Shiftworkers.

A. Wedderburn, 1991, European Foundation for the Improvement of Living and Working Conditions, Wyattville Road, Loughlinstown, Co. Dublin, Ireland.

London Hazards Centre health and safety training

London Hazards Centre courses are aimed at people interested or involved in workplace or community health and safety. Our trainers draw on experience of advising and supporting safety representatives and voluntary organisations to provide practical training which you can apply in the workplace.

One day courses will be held on the following Thursdays:

- **21 January**
General Health & Safety
- **18 February**
VDU Assessments
- **18 March**
General Health & Safety
- **15 April** **Violence at Work**

This general course covers hazard spotting at the workplace, the law, employer and employee responsibilities, safety representatives and safety committees, getting information and organising and negotiating to achieve best practice. Participants will learn about the identification of hazards and how to organise to eliminate them, as well as gaining a firm grounding in basic health and safety law.

Cost: £40 per person

Venue: Interchange Studios, Dalby Street, Kentish Town, London NW5 (Full access for people with disabilities)

Times: 10.00 to 4.30

We can also design and run training at the Centre or your own site. We run local courses with several voluntary service councils and local authorities. Topics we teach include VDU assessment, chemicals, construction, asbestos, and stress. Call us to discuss your needs.

Free health and safety training

The Centre has successfully launched its Lottery funded three year project to improve health and safety management in the voluntary sector in London. In the first three months, the project has received over 250 applications for the 512 places available on training schemes to be run in each Local Authority area. The project worker, Shonagh Methven, wants to hear from voluntary organisations throughout London who would like to benefit from a free place on a training course developed with their needs in mind. Groups will be invited to participate in a session to discuss the health and safety hazards they face at work. Training courses will then be developed by the Centre to address those specific issues.

Interested organisations should ring Shonagh at the Centre on 0171 267 3387.



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

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www.lhc.org.uk

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



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PUBLICATIONS

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- ▼ **Chemical Hazards Handbook**. January 1999. £15/£7*
- ▼ **RSI Hazards Handbook**. January 1997. £12/£4.50*
- ▼ **The Asbestos Hazards Handbook**. December 1995. £12/£5*
- ▼ **Hard Labour: Stress, ill-health and hazardous employment practices**. August 1994. £6.95
- ▼ **VDU Work and the Hazards to Health**. August 1993. £6.50
- ▼ **Protecting the Community: A worker's guide to health and safety in Europe**. May 1992. Now only £2
- ▼ **Sick Building Syndrome: Causes, effects and control**. June 1990. £4.50
- ▼ **Fluorescent Lighting: A health hazard overhead**. March 1987. £2.00*/£5.00
- ▼ **Toxic Treatments: Wood preservative hazards at work and in the home**. January 1989. £5.95

* Price to community groups/tenants associations/trade unions when ordered direct from the Centre.

Add £0.50 post and packing up to each £5 worth of books. Discounts for 10 or more copies.

Cheques to 'London Hazards Centre Trust Ltd'.

For a list of factsheets contact the Centre or send SAE.

Fax appeal

The Centre has had a good reaction to its appeal for donations towards a new fax machine. The old fax was laid to rest soon after the appeal was sent out and we have a new more efficient fax with which to speedily reply to inquiries. We have received other donations this year not specifically in response to the fax appeal. Donations in the first six months of this financial year totalled £1,510. We would like to thank the people and organisations listed below for their generous support.

ASLEF
BECTU: Central London Safety Reps Committee
BOC Cryopplants Joint Shop Stewards Committee
Centre for Occupational and Environmental Health: De Montfort University
Drysdale & District Residents Association
For the Safety of the Home and Family
GMB: Southern Region: APEX
IPMS
MSF: London Insurance and Finance 480

MSF: Professional Sales Association: Harrow & Home Counties North Branch
MSF: West End Branch
NAPO
NUJ: Open University Chapel
PCS: DSS HQ Branch
Potteries Action on Safety and Health
RMT: Neasden (1070) Branch
TGWU: Somerset County Committee
UNISON: Camden
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Ms Jane Wibberley
and last but not least
Anon

Online? Have you visited the LHC Web Site at www.lhc.org.uk

'I would like to congratulate you on your web site... invaluable as a safety representative with the GMB'

As well as news and background on the centre our Web site contains two databases:

- HAZLIT
union, campaign, medical and official documents summarised from our point of view

- HAZTEXT
full searchable text of our books, factsheets and newsletters.

'Very useful for myself and the reps on the TUC courses I tutor... this is a database operating for them'

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

E-mail: mail@lhc.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.