

**Note of the first meeting of the Ionising Radiations Health & Safety
Forum, held on Monday 7 July 2003 at Rose Court, 2 Southwark Bridge,
London SE1**

Present:

Chair: Dr S A Harbison CB

Members: Dr P J Allisy-Roberts OBE
Dr R Coates
Dr R W Davies
Mr P Foley
Dr L K Harding
Dr V J Lewington
Ms J McSorley
Mr J Miller
Mr R Moore
Ms S Murray
Mr R A Paynter
Dr H Porter
Mr G Renn
Mr A R Richards
Dr R A Shields
Mr D J Small

Observers: Mr N Barton DfT
Mrs S Caldwell HSE
Mr R Russ Environment Agency
Mr D Webbe-Wood Food Standards Agency
Mr C K Wilson Defra

Secretariat Mrs W P Bines OBE
Mr N J Higham

Apologies: Mr M Bonnett, Prof R H Clarke, Dr R H Corbett,
Mr S Ebdon-Jackson, Dr J Godfrey, Dr D S Harvey, Mr J Kane,
Dr E O Crawley (Welsh Assembly Government) and Mr J Logan (Scottish
Executive).

Terms of reference and ways of working

IRHSF P1/03

- 1.1 HSE clarified the term 'relevant matters' in the proposed terms of reference, as referring to the use of ionising radiations in the workplace context, in line with HSC/E responsibilities. Members agreed the terms of reference at paragraph 2 of the paper.
- 1.2 It was agreed that all papers and information from members should be channelled via the secretariat which would clarify their status before

circulation. All papers would be fully open unless otherwise indicated. The secretariat would not provide a separate covering note but would clarify what, if any, action was required from members. All papers would be circulated by e-mail. Members agreed the ways of working at paragraphs 3 and 4 of the paper.

- 1.3 It was agreed that there should not be a distinction between observers and members. All Forum nominees would be members.
- 1.4 HSE confirmed that the Forum did not fall within the ambit of the Commissioner for Public Appointments' Code of Practice. The Forum agreed that it would review its membership after five years, bearing in mind that it would not want to see a complete change in its composition at that stage.
- 1.5 The Forum agreed that **the CBI members would provide the Chair for the coming year.**

Occupational exposure to radon

IRHSF P2/03

- 2.1 Members agreed that it would be sensible for HSE to raise the profile of occupational risks from radon. This could be achieved through a combination of the provision of information/awareness raising campaigns, a higher enforcement profile, and a focus on specific radon-affected areas in liaison with appropriate Local Authorities. The appearance of revised HSE internal guidance could provide the impetus.
- 2.2 HSE agreed to consider the case for increasing its resources for this work. **The revised HSE internal guidance would be circulated to members.**

Control of radioactive sources

- 3.1 HSE reminded members of the provisions in IRR99 relating to control of radioactive substances (regulations 27 – 30) and the increased need for compliance in the post-9/11 climate.
- 3.2 The Environment Agency updated members on the current state of play regarding the EC's High Activity Sealed Sources Directive (HASS). **Secretariat agreed to circulate a copy of the PowerPoint presentation to members.**

Recent and future developments

- 4.1 HSE had recently published 'Strategic Thinking – work in progress' that outlined HSC/E's strategic thinking on the future of health and safety

over the coming 6 – 10 years, and on which comments were invited by 13 August 2003. **It was agreed that details of how to access the document on the HSE website would be circulated to members - <http://www.hse.gov.uk/consult/live.htm>**

- 4.2 Members discussed reports of the latest developments concerning revision of ICRP recommendations. A revised consultation draft text could appear towards the end of the year, following the ICRP meeting in Buenos Aires in November. It was agreed that members would share, via the secretariat, information on ICRP consultations. The 2004 meeting of the Forum should discuss developments as a main agenda item.
- 4.3 Members were also informed about:
- talks between the UK and the Netherlands to explore the possibility of the mutual recognition of qualified experts (UK radiation protection advisers and Dutch radiation protection experts), that might then provide a blueprint for wider European arrangements;
 - the EC's proposed Discussion Platform on education and training; and
 - HSE's proposals to consult on amending regulations to IRR99 (principally to allow emergency exposures, where appropriate, for on-site emergencies).
- 4.4 Defra reported the latest developments on implementation of the justification requirements of the BSS Directive. Current plans were for consultation on the UK's implementation proposals to take place in summer/autumn 2003, and for new regulations to come into force in early 2004. It was agreed that **the Secretariat would alert members when the public consultation round started.**
- 4.5 DfT, EA and NRPB also provided updates.

Any other business

- 5.1 There were no items raised.

Date of next meeting

- 6.1 It was agreed that the next meeting would take place in approximately one year's time. **The secretariat would liaise with the next Chair and contact members in due course.**

**IRHSF Secretariat
July 2003**

THE IONISING RADIATIONS HEALTH & SAFETY FORUM - TERMS OF REFERENCE AND WAYS OF WORKING

Issue

1 To consider and formally agree the Forum's Terms of Reference and its ways of working.

Terms of Reference

2 The following terms of reference are proposed:

“To provide a liaison mechanism between the Health and Safety Executive (the Executive) and stakeholders on matters concerning protection against exposure to ionising radiations that are relevant to the work of the Health and Safety Commission and the Executive, and to identify significant issues for future action.”

Ways of working

3 It is envisaged that the Forum should be largely member-led, with papers prepared by members and the agenda based on members' ideas (subject to items proposed being within the remit of HSC/E). HSE will provide a basic secretariat which, in liaison with the Chair, will retain editorial control over the agenda and papers (to ensure that HSC/E's remit is not exceeded). The main focus is the annual meeting, although it will be open to HSE or members to propose additional meetings if urgent business so requires, or the setting up of temporary working groups (which could conduct the majority of their business via e-mail). HSE will circulate information to Forum members by e-mail. The annual meeting will provide a useful opportunity for Government organisations to update members on significant developments, and, for example, for the developing ICRP thinking to be presented and discussed.

4 It is not currently envisaged that it would be necessary for the Forum to adopt specific rules for its discussions (eg Chatham House), and its remit does not require the production of regular reports, only as may be identified. The Secretariat will produce a summary note of the annual meeting. In line with Government policy on openness, the Forum's agendas, papers and other significant outputs, eg notes of meetings and any reports, will be placed on the HSE website, to enable all those with an interest to keep up to date on its work and current thinking. In due course the Forum could consider moving to open annual meetings.

Membership

5 A list of members and observers is attached at the Annex. It is not proposed that members be appointed for a specific period. It is suggested that Forum members review the membership after, say, two years in the first instance and periodically thereafter.

6 In the meantime the position of Chair will need to be considered. Dr Harbison, previously Chair of the Ionising Radiations Advisory Committee, agreed to chair the first meeting of the Forum to provide some continuity but does not wish to continue in this role after the meeting on 7 July. Members will wish to consider and agree a process for appointing subsequent Chairs.

Action

7 Members are invited to agree:

- The Forum's Terms of Reference (para 2);
- The Forum's ways of working (paras 3 & 4);
- The appropriate period for reviewing the membership; and
- Arrangements for appointing subsequent Chairs.

Secretariat
June 2003

Membership

Chair

Dr Sam Harbison

Members

Dr Roger Coates	CBI
Dr Wynne Davies	CBI
Dr David Harvey	CBI
Mr David Small	BINDT – small firms
Mr Steve Ebdon-Jackson	Dept of Health
Mr Roger Moore	Ministry of Defence
Mr Malcolm Bonnett	TUC
Mr John Kane	TUC
Mr John Miller	TUC
Ms Susan Murray	TUC
Dr Hamish Porter	TUC
Mr Guy Renn	TUC
Mr Peter Foley	Local Authority Associations
Dr Penny Allisy-Roberts	Professional Societies
Dr Robert Corbett	Professional Societies
Dr Val Lewington	Professional Societies
Dr Robert Shields	Professional Societies
Mr Tony Richards	AURPO – research & teaching
Mr Richard Paynter	NRPB
Dr John Godfrey	NCC – public interest
Ms Jean McSorley	Pressure Groups – Greenpeace
Prof. Roger Clarke	Member of EC's Article 31 Group of experts
Dr Keith Harding	Member of EC's Article 31 Group of experts

Observers

Dr Owen Crawley	Welsh Assembly Government
Mrs Sandra Caldwell	Health & Safety Executive
Mr Stuart Conney	Food Standards Agency
Mr David Jenkinson	Dept for Trade & Industry
Mr Bob Russ	Environment Agency
Mr Jim Stewart	Dept for Transport
Mr Chris Wilson	Dept for Environment, Food & Rural Affairs

Secretariat

Mrs Wendy Bines
Mr Neville Higham
Mr Laurence Evans
Mr Tim Holt

Occupational exposure to radon

Issue

1 HSE's approach to the risks arising from occupational exposure to radon.

Proposal

2 Members are invited to consider how, and to what extent, HSE should seek to raise the profile of occupational exposure to radon (taking into account its published priorities and resource constraints).

Argument

3 Since radon-affected areas were first identified in 1986, HSE has undertaken several local initiatives to raise awareness and encourage remediation where appropriate. The regional nature of the problem, the fact that radon is not the result of a work process but comes from the environment, the low public perception of the risks from radon and constraints on HSE resources were all contributory factors to the limited impact of these initiatives. Furthermore, it is very difficult to link any specific case of lung cancer to occupational exposure to radon – other factors could have a bearing, such as domestic exposure, smoking etc.

4 More recently, a number of Local Authorities in radon-affected areas have taken a proactive enforcement/awareness-raising stance on radon in the workplace. This has been reinforced by the Defra sponsored Radon Roll-out Programme – a partnership approach, with certain Local Authorities offering free radon tests in domestic premises.

5 The recent paper by Dr Henry Rothstein on 'Neglected Risk Regulation: The institutional attenuation phenomenon' uses radon as one of three case studies to support his theory. The paper drew attention to HSE's low profile on radon enforcement, in spite of clarity of statute and the fact that remedial action is generally relatively simple and inexpensive. It quoted NRPB estimates of some 250 cases of lung cancer annually that may arise from exposure at work (this has subsequently been updated by the NRPB to a range of 90 to 280 cases a year). The paper was published in Health, Risk & Society in March 2003. Shorter versions have subsequently appeared in Risk & Regulation and New Scientist. .

6 Despite the lack of interest shown so far by the national or specialist health and safety press the articles, plus the recent Local Authority/Defra developments, may provide an impetus that would make further initiatives more effective. HSE is therefore reviewing its current enforcement policy on occupational exposure to radon, in the light of its resources and published priorities.

Background

7 Most workplaces do not have significant radon levels. Surveys show that premises in five areas of England: - Cornwall, Devon, Northamptonshire, Derbyshire (parts of), and Somerset (parts of). In addition, many parts of Wales and the Grampian and Highlands regions of Scotland are more likely to have high indoor radon levels. (There are some other small areas in England that are likely to have high indoor radon levels.)

8 The NRPB estimates that there are some 160,000 workplaces in radon-affected areas – 150,000 in England and 10,000 in Scotland and Wales. The NRPB estimates that on average some 10% of workplaces in radon affected areas are likely to have levels in excess of 400 Bq m⁻³.

9 IRR99 apply to work carried out in an atmosphere containing radon 222 gas at a concentration in air, averaged over any 24-hour period exceeding 400 Bq m⁻³. The most effective method that employers can use to deal with radon in the workplace is to reduce levels below 400 Bq m⁻³. This can usually be achieved relatively simply through inexpensive engineering methods. If the levels cannot be reduced below 400 Bq m⁻³ then IRR99 apply.

10 HSE will shortly publish an updated Operational Circular (OC) on Occupational exposure to radon in workplace buildings, aimed at all HSE Inspectors. The main differences relate to the application of the Ionising Radiations Regulations 1999 to occupational radon exposure (in particular, the need for a suitable risk assessment, and requirements for consultation with and appointment of RPAs), the provision of updated information on radon measurements, and details of contacts for further advice. It also contains an Information Document that inspectors can copy to employers on visits. The OC recommends that HSE Inspectors should require employers to undertake risk assessments under regulation 3 of MHSWR in those areas identified by the NRPB as radon-affected areas. This will enable employers to determine if there may be a radon hazard within their workplace.

Action

11. Members are invited to discuss these issues.

Secretariat
June 2003