Health and Safety Executive Board			HSE/ 14 /40
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Type of Paper:	Above the Line	**Exemptions:**	
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Consultation on aligning domestic legislation with the EU direct acting Classification, Labelling and Packaging Regulation (CLP)

Purpose of the paper

1. To seek the Board's agreement to consult on proposals to amend a number of health and safety regulations to align them with the EU direct acting Classification, Labelling and Packaging Regulation (the CLP Regulation) and transpose EU amending Directive 2014/27/EU.

Background

2. The CLP Regulation has been progressively introduced across all EU member states since 2009 and comes fully into force on 1 June 2015. The CLP Regulation replaces the Dangerous Substances Directive (DSD) and Dangerous Preparations Directive (DPD) which are implemented in Great Britain by the Chemicals (Hazardous Information and Packaging for Supply) Regulations 2009 (CHIP 2009).

3. When the CLP Regulation comes fully into force the two directives and CHIP 2009 will be revoked. As a consequence, technical amendments to a number of health and safety regulations will need to be made to replace references to DSD/DPD and CHIP to align them with CLP to ensure the regulations remain workable.

4. For similar reasons, the European Commission published amending directive 2014/27/EU on 5 March 2014 which amends five worker protection directives to align them with the CLP Regulation. The amending directive has a transposition deadline of the 1 June 2015. The required changes will be implemented by amending the following existing regulations: -

   - Health and Safety (Safety Signs and Signals) Regulations (SSSR) 1996
   - Control of Substances Hazardous to Health Regulations (COSHH) 2002
   - The Dangerous Substances and Explosive Atmospheres Regulations (DSEAR) 2002
   - The Management of Health and Safety at Work Regulations (MHSW) 1999

Argument

5. At its meeting on 29 January 2014 the Board agreed to recommend to the Minister that only the minimum legal changes required to align domestic regulations with the CLP Regulation should be made. The Minister has subsequently confirmed his agreement to this approach and the attached consultation document and impact assessment (annex 1) have been prepared

on this basis.

Impact Assessment

6. The consultation stage impact assessment is included as Annex 2 of the consultation document (CD). In summary, the impact assessment (IA) concludes that impact on business of the majority of the amendments required to existing regulations to transpose the amending directive and to make the various consequential amendments required is likely to be negligible.

7. However, the changes to the Health and Safety (Safety Signs and Signals) Regulations 1996 do have the potential to give rise to more significant costs to business, as some existing signs and labels will have to be changed. The initial assessment has produced a best estimate total one-off costs to business of £2.9 million, and total one-off costs to public sector organisations of £1.0 million. This estimate is based on very limited data and a number of assumptions have had to be made based on HSE's experience. These assumptions will be tested as part of the consultation and the IA updated accordingly.

8. The IA describes the benefits to business of ensuring that the law remains workable so as to avoid causing confusion and the costs and economic efficiency losses that this would give rise to. While it has not been possible to quantify these benefits it is expected that the costs of inconsistent and confusing legislation would be considerable.

9. The IA also includes reference to amendments required to Maritime and Coastguard Agency (MCA) regulations which also transpose the relevant directives in relation to ships and vessels. It is intended that these amendments will be included in HSE's amending SI. It has been agreed that the MCA will conduct a separate consultation exercise on the changes to their regulations.

10. In accordance with the Better Regulation scrutiny procedures the IA was submitted to the Regulation Policy Committee (RPC) for their assessment at the end of March. The RPC's opinion is expected the week commencing 12 May and an update will be provided at the Board meeting.

Consultation

11. The CD makes clear that the amendments proposed are technical changes and the minimum legally required to transpose the amending directive and to align with the CLP regulations. The document is divided into four sections dealing with each of the four regulations that need to be updated. The majority of the questions posed are designed to gather further information for the impact assessment to better inform the costs and benefits to business of the changes.

12. Due to the technical nature of the changes, and the fact they are the minimum legally required to transpose the amending directive and to align with the CLP regulations, it is proposed to carry out an eight week consultation. Key stakeholders have been identified and the consultation will be brought to their attention.

Devolved Administrations

13. A number of the consequential changes required as a result of the revocation DSD and DPD and of CHIP impact on Scottish and Welsh specific regulations. These changes have been discussed in detail with officials in the Scottish and Welsh Governments and agreement gained that the relevant devolved administration will take responsibility for making the amendments. Advice has also been provided on the proposed approach to make the changes required to transpose the amending directive. The changes required have also been discussed with officials in Northern Ireland.

Action

14. The Board is asked to:

    i) agree to the proposed consultation; and

    ii) note it is planned to start the consultation on 9 June. However, this date is subject to receiving clearance to consult from the Reducing Regulation sub-Committee and Home Affairs Committee which will be sought immediately the RPC opinion on the IA is received.

Paper clearance

15. Karen Clayton, Director, Ling Latency Health Risks Division, Cross Cutting Interventions Directorate.