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| Advisory Committee on Toxic Substances Minutes | | ACTS/MINS/01/2013 | |
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| Exemptions: | None | | |

| Advisory Committee on Toxic Substances (ACTS) | |
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| Minutes of the 102nd meeting of the Advisory Committee on Toxic Substances held on 01 October 2013 at Usdaw, Manchester | |
| <p>Present: Jane Willis - Chair (HSE) Ian Brown - Independent Alastair Hay - TUC John Hopley – CBI Len Levy – Independent Bud Hudspith – TUC Roger Alesbury – CBI Robin Chapman – CBI</p> <p>Apologies: Steve Francis – CBI Doug Russell – TUC Susan Murray - TUC</p> | <p>Officials Present: Kären Clayton - Director, Long Latency Health Risks Division (LLHRD) Gill Smith – HSE Marie Warburton – HSE Secretariat Lee Kenny – HSE Emma Tan – HSL</p> |

| Item | |
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| 1 | Introductions and apologies |
| 1.1(i) | The Chair welcomed members to the 102nd meeting of the Advisory Committee on Toxic Substances and thanked Doug Russell and USDAW for providing the venue. |
| 1.1(ii) | Apologies were received from Susan Murray and Doug Russell. The Chair informed members Steve Francis had recently suffered serious ill health and members wished him a good recovery. The Chair also confirmed that Steve Tolley representing Local Authorities has stepped down and asked her thanks to him to be recorded. |
| 2 | Agreement of minutes/matters arising |
| 2.1(i) | The minutes of the 101 st meeting of ACTS were formally accepted with one noted amendment to 2.1(ii) which should read '100 th 'meeting. |
| 2.2 | Current Issues |
| 2.2(i) | <u>Update on changes to HSE's Senior Management</u> The Chair updated ACTS members on the recent changes to HSE Senior Management. The Chair confirmed Geoffrey Podger had left HSE at the end of August after 7 years as Chief Executive to take up a new role in New Zealand. Kevin Myers had taken up the role of Acting Chief Executive. Kevin has worked in |

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| <p>Item</p> | <p>HSE for 37 years joining HSE as a factory inspector in 1976, undertaking a range of posts in the organisation, being appointed Deputy Chief Executive in October 2008. Kevin is supported by Gordon MacDonald as Acting Deputy Chief Executive, who has been with HSE for 35 years. The Chair confirmed plans were already underway to recruit a new Chief Executive for HSE.</p> <p>Action Point 1: Inform ACTS members when the new Chief Executive is in post.</p> |
| <p>2.3 2.3(i)</p> | <p><u>Triennial Review of HSE</u> The Chair explained that a Triennial Review of HSE was in progress. These three year reviews are standard for all Non-Departmental Public Bodies and are undertaken according to published Cabinet Office guidance. The Review is being led on behalf of the Department for Work and Pensions by Martin Temple, the Chair of the EEF and is looking at HSE’s functions, form and governance. The Chair confirmed that the call for evidence seeking views from stakeholders on HSE’s functions and governance was published on the DWP website on 14 June 2013. A report of the outcome of the review will be published in due course.</p> |
| <p>2.3(ii)</p> | <p>A TUC member asked who had been consulted as part of the Triennial Review. The Chair confirmed that HSE had provided DWP with a list of stakeholders; the list included organisations such as the TUC and the Small Business Trade Association Forum (SBTAF). The Chair explained that HSE was necessarily being kept at arms length from the review team’s work, but the feedback from initial discussions has been good. ACTS members agreed they strongly supported the work of HSE and for the policy function to stay within with HSE.</p> <p>Action Point 2: On completion of review circulate the Triennial Review report to ACTS members.</p> |
| <p>2.4</p> | <p><u>Update on HSE’s review of ACOPS</u></p> |
| <p>2.4(i)</p> | <p>HSE provided an update on the latest progress on the review of the COSHH, Asbestos, Legionella and DSEAR ACOPs.</p> |
| <p>2.4(ii)</p> | <p>HSE confirmed the public consultation for the COSHH ACOP concluded in August. The consultation document was downloaded from HSE’s website over 4,000 times, although only 74 responses were received. 55% of those who answered the questions agreed that the draft revised ACOP now gave sufficient clarity on how to comply with the law. Of the 45% who did not agree, most raised specific points on aspects of the ACOP they believed could be improved. If approved by the HSE Board, Ministerial agreement will be sought to publish COSHH ACOP in November 2013.</p> |
| <p>2.4(iii)</p> | <p>HSE confirmed the public consultation for Asbestos concluded on 30 September; 86 replies were received. Most comments indicated the ACOP had been improved, with better navigation. If the HSE Board approves the revised document, Ministerial agreement will be sought to publish the Asbestos ACOP in December 2013.</p> |
| <p>2.4(iv)</p> | <p>HSE confirmed the public consultation on the revised Legionella ACOP ran between June and August 2013. The consultation received 100 responses, with 70% of those who responded in agreement that the draft revised ACOP now gave greater clarity on how to comply with the law. Of the 30% not agreeing, some responses were related to issues that the technical guidance will address. If the HSE Board approves, Ministerial agreement will be sought to publish the ACOP in</p> |

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| Item | November 2013. |
| 2.4(v) | The review and revision of the DSEAR ACOP included consolidation of 6 ACOPs into one. 32 replies were received from the consultation process. The proposal is to go to the Board for approval in November 2013. |
| 2.5 | <u>Update on EU activities on occupational disease</u> |
| 2.5(i) | HSE informed ACTS members that DG Employment and Social Affairs are organising a two-day conference on 3/4 December 2013 in Brussels. The <i>Occupational Diseases in the EU</i> conference will be based around the report on "The current situation in relation to occupational diseases in EU Member States and EFTA/EEA countries", in particular relative to the Commission recommendation 2003/670/EC concerning the European Schedule of Occupational Diseases and gathering of data on relevant related aspects. The agenda for the conference is still under development but it will consider a broad range of occupational diseases including asbestos mental health, musculoskeletal diseases (MSDs) and new and emerging workplace risks. HSE confirmed six HSE staff will attend the event including HSE's Chief Statistician, and representatives from HSE Specialist and Policy Teams. |
| 2.5(ii) | ACTS members discussed the planned EU event and agreed the HSE's attendance would be very useful, suggesting HSE use this opportunity to talk about prevention. Members agreed that the EU puts a lot of effort into developing occupational limits, but that there are problems in the EU with data collection and issues around member states reaching agreement on limits and implementing and enforcing the limits. Members suggested Professor Keith Palmer (IIAC) might be a very useful UK contributor to the workshop. |
| 2.6 | <u>Occupational Disease Event</u> |
| 2.6(i) | HSE updated members on the latest progress following the Occupational Disease Event held in London on the 14 March 2013. The event was held to help develop new approaches and to encourage those not already involved in activities around occupational disease to get involved. HSE confirmed a number of discussions had taken place with organisations but that the general uptake had been disappointing. HSE confirmed they met with Crossrail to discuss their plans around DEEEs and also with DH on their 'Be clear on cancer blood in your pee' initiative. HSE explained a new HSE web page was under development and on completion this would be used to promote innovative ideas to tackle occupational disease, as well as to capture and promote existing work being undertaken by HSE and others. |
| 2.6(ii) | A TUC member expressed concerns about the content of the occupational event HSE Board paper and asked HSE to give more consideration to the work already being done by TUC including Unite the union on Motor Vehicle Repair (MVR) issues; campaigns; action on silica issues; TUC involvement in Partnership Teams. The TUC member confirmed TUC is available and willing to do more with HSE. |
| 2.6(iii) | HSE explained that the new website was a good opportunity to showcase this ongoing TUC work and to encourage other groups and organisations to use this website. |

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| 2.7 | <u>Update on SCOEL report on ultrafine particles</u> |
| 2.7(i) | <p>An ACTS member gave members a brief update on the Joint Research Centre (JRC) study on workers exposure to particles in airports. Based on the Danish study, the JRC criteria report, due October 2014 will look into a number of things:</p> <ul style="list-style-type: none"> • Type of aviation fuels • Update of fuels and toxicology • Who is exposed • Review existing OELs • Produce summary document. |
| | <p>Development of the second report for DG Empl contracted to JRC, will involve a workshop organised by the Commission in early 2014.</p> |
| 2.7(ii) | <p>ACTS members asked if there was already a good body of evidence available on airport exposure and the health effects due to exposure. An ACTS member confirmed some papers on airport exposure from Japan and America had been discussed at SCOEL previously.</p> <p>Action Point 3: When available circulate JCR report on aviation fuels to ACTS members.</p> |
| 2.8(i) | <p>At this point a TUC member referred members and HSE to the notes of the last (101st) meeting of ACTS, in particular point 3.1(iii) relating to the discussions on the practicality of setting a limit of 0.05mg/m³ for Respirable Crystalline Silica (RCS) and whether it was possible to measure below this level. The TUC member asked HSE why, if it is possible in other countries to measure below this level, HSE (UK) cannot agree to set a new lower limit for RCS. HSE commented that under the controlled test conditions it was technically possible to measure RCS at 0.05mg/m³, however it was considered that the measurement methodology was not practical for reliable use in the workplace at present.</p> |
| 2.8(ii) | <p>HSE also confirmed that the EU had not made any decision on the inclusion of RCS in the revision of the Carcinogens and Mutagens Directive (CMD), or on any changes to the current workplace exposure limit.</p> |
| 2.8(iii) | <p>A TUC members reminded HSE and ACTS members of discussions at an ACTS meeting a number of years ago relating to an agreement to amend the WEL for RCS from 0.1mg/m³ to 0.05mg/m³ when it became possible to measure at the lower limit. HSE agreed to check the records of these discussions and review the agreed decisions and actions.</p> |
| 2.8(iv) | <p>ACTS members discussed the practicality of setting a lower exposure limit considering the changes to measuring technologies available in UK laboratories. Members agreed if the situation had changed and there was now less uncertainty in measuring lower levels then HSE and ACTS would want to review the position.</p> <p>Action Point 4: In relation to discussions (2.8ii) on limit setting HSE to locate and circulate previous meeting minutes and provide a response.</p> |

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| 3 | <u>How HSE secures expert advice on occupational disease issues</u> |
| 3.1(i) | HSE provided an update on the review of how HSE secures expert advice on occupational disease issues. The full presentation will be circulated to ACTS members. |
| | The presentation covered the following: |
| | <ul style="list-style-type: none"> • Objectives of review • Scope of review • Recent government thinking on scientific advice • The policy cycle • What expertise does HSE need - short term and long term • Case study • Problem formulation • Issues to work through |
| 3.1(ii) | The Chair explained that this work is still at an early stage and has not been shared widely. The issues are open for discussion, no decisions have been made and the review is primarily about having access to and engaging with the right people at the right point to find solutions to the issues. |
| 3.1(iii) | ACTS members agreed the review was important, necessary and timely. A number of members commented that ACTS have asked a number of times for an evaluation of the previous work of ACTS. The Chair confirmed that this review is not only about the advice given to HSE by ACTS, but is looking more widely at the issue. |
| 3.1(iv) | The key points from discussion on Lee's presentation were: |
| | <ul style="list-style-type: none"> • Could be useful for HSE to share other government advisory committees and to work together to tackle issues. There was a view however that in practice this would not work, for example, Department of Health (DH) is not interested in occupational health issues. • Key is to look at the policy cycle with the expert advice supporting policy. • Agreement there is a need to look at emerging issues but also need to focus on the issues we are already aware of. • The role of ACTS is to advise the HSE Board. More recently ACTS role has changed and HSE is not making full use of the expertise of ACTS members. • Managing expectations. Members agreed there is a need to be realistic on what can be delivered with the resources available from ACTS members. |
| 3.2(v) | The Chair thanked ACTS members for their input to the discussion and reminded members this was not only about ACTS, but agreed it did potentially impact on the future work of ACTS. Members would be kept informed on the progress of the review. |
| | Action point 5: Circulate the presentation to ACTS members. |
| 4 | <u>Developing a way forward for the future activity on low Toxicity Dust</u> |
| 4.1(i) | <u>Update following the publication of the 'Commentary for Annals of Occupational Hygiene: Low-Toxicity Dusts' by ACTS member Alastair Hay</u> |
| | <ul style="list-style-type: none"> • The 'Commentary' was produced following discussions at the 2012 BOHS workshop on low toxicity dusts. • Those taking part in the workshop recognised that a range of exposures to |

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| <p>Item</p> | <p>low toxicity dust was causing health problems.</p> <ul style="list-style-type: none"> • Important to try assemble evidence and historical data to consider if there is a safe level for inhalable dust. • The report reflected comments by TUC that the evidence was sufficient to ask for lower interim limits or to recommend removing COSHH limits. <p>4.1(ii) It was confirmed SCOEL has begun a work programme on Low Toxicity Dusts (including aviation fuels) and a draft document will be published early November 2013. Following the scoping project, SCOEL will prepare a criteria document and also organise a scoping workshop in summer 2014. The workshop will involve experts from many countries meeting to discuss the need to find a consensus on what any limit should be.</p> <p>4.2 HSE provided an update on the way forward for future activity on 'Low Toxicity Dust'. The full presentation will be circulated to ACTS members.</p> <p>The presentation covered the following:</p> <ul style="list-style-type: none"> • HSE's response to the 'Cherrie' paper • The Legal Framework - COSHH • EH40 and 'default' WELs • The complexities of the process for changing legislation. <p>Action point 6: Circulate to ACTS members the presentation</p> <p>4.3 HSL provided an update on 'A Dynamic Population Model for Chronic Obstructive Pulmonary Disease'. The full presentation will be circulated to ACTS members.</p> <p>The presentation covered the following:</p> <ul style="list-style-type: none"> • Main components of the dynamic population model • Exposure model: respirable dusts • Model – predictive COPD prevalence • Comparison of substances – smokers and non-smokers • Exposure data • Validation of model <p>4.3(i) HSE confirmed that the work being undertaken by HSL under the one of HSE's ongoing Strategic Research Programmes (SRP) is in response to concerns raised previously about low toxicity dusts and it will contribute to future work to tackle these issues.</p> <p>4.3(ii) ACTS members agreed the presentation on the 'dynamic model' was interesting. Members asked if consideration had been given to the surface area of the dusts and to the additive effects of smoking and exposure to dusts. HSE confirmed there are currently no suitable monitoring technologies to account for the surface area of particles as suggested.</p> <p>Action point 7: Circulate the presentation to ACTS members.</p> |
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| 5. | <p><u>Low Toxicity Dust</u></p> <p>A discussion by ACTS and HSE on the issues around low toxicity dust followed.</p> |
| 5.1 | <p>A TUC member asked if HSE viewed the current standards of 10 and 4mg/m³ as a problem. HSE agreed there was some evidence demonstrating that exposure to low toxicity dust at 4mg/m³ and 10mg/m³ could cause ill health in some workers.</p> |
| 5.2 | <p>A TUC member stated it was wrong to remove Chemical Hazard Alert Notices (CHANS) and that in relation to low toxicity dust HSE should consider issuing a memorandum or safety alert. HSE commented that ACTS had agreed to the reasoning for the removal of CHANS. HSE went on to explain that it could prove legally difficult for HSE to issue a safety alert that goes against current regulations but agreed to discuss this matter further with HSE's Legal Team.</p> |
| 5.3 | <p>ACTS members expressed concerns in relation to the perceived lack of action from HSE on low toxicity dust and called for a change in HSE's response to this issue. The Chair responded that HSE is taking this matter very seriously and is investing time and resource to this issue but confirmed that the regulatory process involved in opening up and changing COSHH legislation is a very complex one as shown in the previous HSE presentation.</p> |
| 5.4 | <p>HSE explained that in order to replace limits or remove exposure limits, a sound evidence base is required which goes beyond the health effects. HSE's confirmed that the HSL modelling work and the development of the COSHH questions sets and other research projects will all help to build up the evidence required.</p> |
| 5.5 | <p>A TUC member asked if SCOEL recommended a lower occupational exposure limit for low toxicity dusts, what if any, additional evidence HSE would require. HSE confirmed the work of SCOEL could possibly provide a solution and a way forward if low toxicity dust was included in the 4th IOELV list.</p> |
| 5.6 | <p>ACTS members agreed that in the longer term changing or removing limits through the current regulatory process and building a scientific case for all individual nuisance dusts would be challenging for HSE. A CBI member suggested ACTS working with other stakeholders e.g. BOHS, should consider in the short term an awareness campaign to focus on addressing the problem.</p> |
| 5.7 | <p>A TUC member suggested WATCH could consider the list of low toxicity substances and prioritise in order of exposure. HSE expressed concerns about this approach as consideration would need to be given not only to exposure data but also to size and scale of the exposed populations and to impact on business.</p> |
| 5.7 | <p>ACTS members discussed the draft questionnaire (circulated prior to the meeting) produced by HSE to gather information on what health professionals understanding is of COSHH requirements regarding low toxicity dusts. HSE invited ACTS members to provide HSE with comments and feedback following the meeting.</p> |

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| 5.8 | The Chair acknowledged the topic was emotive and that discussions on this topic were necessary but not easily resolved and thanked all members for their views and contributions. The Chair suggested that a route map or strategy document be developed, setting out options for a way forward on this issue. The paper should include options both regulatory and non-regulatory and include the ongoing |
| 5.9 | European work. The Chair suggested the issue of low toxicity dust should be the main focus for the next meeting of ACTS in March 2014 and invited members to put forward other interested persons/organisations who should also be involved in future discussions. |
| | <p>Action point 8: ACTS members to provide comments on draft COSHH questionnaire.</p> |
| | <p>Action point 9: HSE to develop a draft strategy document on the way forward with on the issues of low toxicity dust.</p> |
| 6 | <u>AOB</u> |
| 6.1 | No matters of other business were raised. |
| 7 | Next meeting |
| 7.1 | <p><u>Location and Date</u> HSE Redgrave Court, Bootle, Liverpool is the confirmed location for the 103rd meeting of ACTS. Date of meeting is Thursday 13th March 2014.</p> |
| 7.2 | <p><u>Future agenda item</u> Low Toxicity Dust</p> |
| 8 | <p><u>Summary and close</u> The Chair thanked everyone for their attendance and active participation.</p> |