

Advisory Committee on Toxic Substances Paper		ACTS/02/2006	
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ADVISORY COMMITTEE ON TOXIC SUBSTANCES

Matters arising from the meeting of the Working Group on the future of ACTS

A Paper by Garry Wiles

Cleared by Androulla Michael on 18 April 2006

Issue

1. Actions arising from the 3 February meeting of the Working Group looking at the future direction and operation of ACTS.

Timing

2. Routine.

Recommendation

3. For discussion and to agree a way forward.

Background

4. Paper number ACTS/41/2005 taken at the 17 November 2005 ACTS meeting discussed the reconstitution of the Committee. Following discussion on the future direction of ACTS it was agreed to put together a small working group to review the options and evaluate the ACTS successes and otherwise, and for the Working Group to report its findings to the following ACTS meeting. Chaired by Les Philpott, the working group comprises Bud Hudspith, Alastair Hay, Roger Aylesbury, Mike Kingsland and Colin Soutar. It met on 3 February 2006 and a note of the meeting is attached at **Annex 1**.

Argument

5. ACTS is invited to agree to the setting up of a 'skills list' (paragraph 9 in Annex 1), which would assist in deciding where that expertise best added value to achieving HSE's PSA1 targets (paragraph 2 in Annex 1).
6. Due to recent changes in staffing and the current heavy workload of Secretariat members we have been unable to carry out the mapping exercise suggested in paragraph 3 of Annex 1. This will be done in time for the next ACTS meeting.

7. ACTS is invited to discuss what function it may have in providing a strategic overview of activities overseen by HSE's Disease Reduction Board (DRB) (paragraph 4 of Annex 1).
8. In the light of the discussion set out in paragraph 5 of Annex 1, members are invited to agree whether they are content for the ACTS Chair to continue to be filled by senior HSE staff or wished the Secretariat to explore the possibility of the role being taken over at some future date by an independent Chair.

Link to HSC Strategy

9. The main aim of this exercise is to refocus the work of ACTS to add value to the strategic direction of HSE's work on toxic substances.


Communication Plan

10. The work being undertaken by the Working Group and subsequent ACTS decisions on the way forward will inform HSE's advice to HSC on the reconstitution/continued existence of ACTS, as well as facilitating agreement with HSC on ACTS' role in PSA1.

Evaluation Plan

11. It is proposed that the issue of the future of ACTS is revisited at the first meeting in 2007 after decisions have been made by HSC on its reconstitution (due end 2006).

Consultation

12. ACTS Chair to discuss the issues with the HSC Chair, in particular on reconstitution and occupancy of ACTS Chair. ACTS Secretary to discuss with the DRB where ACTS fitted in with the activities overseen by DRB. 

Costs and Benefits

13. Should the decision be taken to offer the HSC Chair position to an independent, there would be costs associated with paying the Chair. The benefits would include having a Committee better able to assist HSE in achieving its PSA1 targets.

Financial/Resource Implications for HSE

14. See above.

Environmental implications

15. None.

European implications

16. None.

Other implications

17. None.

Action

18. ACTS is invited to agree the way forward, in particular on the issues highlighted in paragraphs 5-8 above.

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**Working Group on the future direction of ACTS
Note of a meeting on Friday 3 February 2006**

Present

Les Philpott (Chair)
Roger Aylesbury
Alastair Hay
Bud Hudspith
Mike Kingsland
Colin Soutar
Kevin Walkin (ACTS Secretary)
Garry Wiles (Note taker)

1. It was agreed that a short note would be produced containing the actions agreed by the Working Group (WG).

ACTS Terms of Reference (ToR)

2. The WG agreed that the ToR remained broadly relevant in its current form, but acknowledged that ACTS had not focused very much on the strategic direction of HSC/E's work on toxic substances (item b), and so should be reminded of and recognise its expert advisory function. Agreement was needed about where that expertise best added value to achieving HSE's PSA1 targets (bearing in mind that the Disease Reduction programme would be evidence-based and would be informed by research), whilst maintaining complementarity with other expert committees to ensure efforts did not overlap. ACTS would then need to agree with HSC its role in PSA1, including measuring successes (value added).

3. ACTS has an advisory role as part of the challenge function to HSE activities, and to provide expert advice on what other activities might be undertaken to meet challenges (e.g. where unexpected issues arise that cannot be dealt with purely through REACH). It was agreed there was value in mapping for the next ACTS meeting how this might work in practice, working back from PSA1 targets and taking into account that control mechanisms (e.g. CAD, REACH) were largely coming from Europe, and the controls themselves would be set by manufacturers rather than Member States. The map should include the role of LAs, and where ACTS considers responsibility for WELs should lie in the context of assessing its effectiveness.

Disease Reduction Board (DRB)

4. ACTS may have a function in providing a strategic overview of activities overseen by the DRB, and could usefully find a way of plugging into identifying targets/delivery times relevant to toxic substances by providing the 'missing' element of tripartite involvement. ACTS would first need to know more about how the DRB would operate. (NB – the DRB was not yet formally constituted. This was being done not through nominations but by invitation on the basis of individual expertise.)

ACTS Chair/Secretariat

5. The frequent changes recently to the Chair & Secretariat had produced issues of continuity. There was a need to manage change better, ensuing there were handover

periods and no gaps as had happened in the past. Mr Philpott was keen to see the ACTS review through to completion and assured the WG that he would retain the ACTS Chair if moved on to other work in HSE. Another option raised was an independent (paid) Chair who could drive issues forward. No strong views emerged.

ACTS processes & procedures:

6. The current set-up (formal meetings 3 times a year with sometimes unwieldy papers) was a potential barrier to delivery of the disease reduction programme targets.

- Papers - In future to be shorter & punchier, posing questions for ACTS to provide expert advice, and highlighting problems. ACTS' role was to provide strategic views rather than the delivery of the programme.
- Meetings - Fixing dates well in advance would ensure maximum participation. Where urgent issues arise, Secretariat should bring together a representative sample of members to provide expert advice (email was one option). Open meetings – were they really effective? If so, what structure should they follow?
- Agendas - Secretariat should be sufficiently in tune with ACTS activities to be able to set agendas, but Members were encouraged to propose agenda items, which would be presented by the proposer for initial discussion to agree on what needed doing.

7. Items suggested for next meeting (to be set for late April/early May):

- Reconstitution – led by WG discussion
- Asbestos consultation – Kevin Walkin to lead
- REACH implementation – Mike Kingsland to present
- Nanoparticles – Colin Soutar to present. WATCH paper/minutes to be circulated

8. Potential items for future meetings (this would assist in putting the case to HSC for the continued existence of ACTS):

Silica

Carcinogens

COSHH – is this helping reduce the frequency of ill health

Chemicals essentials – work on a 'one stop shop' for SMEs

Global harmonisation

Other issues

Skills List for ACTS members

9. ACTS had a function in work on Regulatory Simplification, but it was unclear whether ACTS had a human factors specialist to inform the discussion. It was suggested that a 'skills list' for current members should be compiled.

Reconstitution

10. Due end 2006. Chair to discuss the future of ACTS with HSC Chair before this.