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HEALTH AND SAFETY COMMISSION
ADVISORY COMMITTEE ON TOXIC SUBSTANCES
Finalisation of ACTS's Future Work Plan 2003 – 2006
A paper by ACTS Secretariat. Cleared by John Thompson

Issue

- 1 A response to Bill Callaghan's letter to HSC Advisory Committees on the delivery of outcomes from the HSC Strategic Plan, in particular tackling issues that will make a difference in the next 3 – 5 years.

Timing

- 2 ACTS has been reconstituted for a year from March 2002 and will need to make a case to the Director General (DG) of the Health and Safety Executive (HSE) before March 2003 to secure reconstitution. An essential part of this case is the development of a challenging but feasible Plan of Work designed to meet the delivery needs of HSC's Strategic Plan.
- 3 At the 22/23 July 2002 residential meeting, Secretariat was tasked to take away the Rapporteur presentations and committee discussions, theme the ideas that have emerged and propose priorities. These will be the basis of the new work Plan to be agreed on 21 November 2002.
- 4 Early approval of a Plan is recommended in order to establish the list of issues to be completed by ACTS during the period to 31 December 2006.

Recommendation

- 5 Members are invited to consider and approve the prioritised sub-themes, identified paragraph 14. Members are also invited to consider whether the draft Plan of Work at Annex 5, filled with possible initiatives, can go forward to the DG as a basis for ACTS reconstitution.

Background

- 6 At ACTS's July 2002 meeting members considered and discussed issues from a fundamental perspective to develop a strategic plan to bring about real improvements in the workplace arising from exposure to toxic substances. As a

result, members have agreed to develop a plan that will make a real difference in the workplace by contributing to Revitalising Health and Safety targets.

- 7 Members examined the 5 Key Areas suggested for the new Plan. The Key Areas were:
 - a) The Aims - what it is ACTS wants to achieve;
 - b) Knowledge - what it is ACTS need to know in order to achieve it;
 - c) Tools - what tools are needed for delivery;
 - d) Implementation - what mechanisms can be used to raise awareness; and
 - e) Evaluation - what needs to be evaluated to make sure it works.
- 8 Progress in the Key Areas b) to e) depended on members agreeing a common view of the Aims of a new work Plan circulated prior to the meeting. This was redrafted to reflect comments received from members. ACTS agreed in principle that the single Aim of the Plan should be to stop people being made ill from exposure to substances at work. Secretariat has prepared a redrafted Aim at Annex 1. This was circulated to members in September for comment. As those who commented approved the Aim, HSE proposes to adopt it as the *raison d'être* of the Plan of Work.
- 9 Following the meeting, Secretariat analysed the Rapporteur feedback material and discussions on ACTS's work Plan. The themes that emerged are set out at Annex 2.

Argument

- 10 It is suggested that the 5 Key Areas of the Plan proposed in the paper Developing a Strategic Plan 2002 – 2006 (ACTS/21/2002) are revised to 4 Key Areas and supplemented by 3 additional areas. The new Key Areas are:
 - a) **The Aim** – to stop people being made ill from exposure to substances at work;
 - b) **Knowledge Gaps** – data ACTS does not currently have or have access to, but may need to know to help deliver the Plan;
 - c) **Delivery** – how we achieve our Aim, combining the tools that are available or that can be developed, with specific communication strategies to reach our target audiences; and
 - d) **Evaluation** – mechanisms to monitor and evaluate how well initiatives fulfil the Aim of the Plan.

There are also additional Areas that need to be factored into the WorkPlan:

- e) On going work streams carried over from the current work plan e.g. the Occupational Exposure Limit Framework Review.
- f) Mandatory activities that need to be factored into the Plan e.g. the second Indicative Occupational Exposure Limit Value Directive.
- g) Periodic Forward Looks / Horizon Scanning and adjustment of advice to HSC – it is suggested that these issues should be reviewed annually, at the meeting before the end of the planning year.

- 11 The shift from Knowledge to Knowledge Gaps better reflects what we are actually addressing in this Key Area. The amalgamation of Tools and Implementation into Delivery reflects the commonality of themes that emerged in these areas and the sense that they are more usefully treated together.
- 12 Many themes emerged against the Key Areas b) to d). Some of the themes in Delivery and all of the themes within Evaluation are **essential themes**. They are distinct operations and/or aspirations that need to be reflected so far as is possible in any activity in these Key Areas. The themes essential for Delivery are in practice the components of any project plan that will be developed for an initiative that is selected for the Work Plan. They include themes necessary for Evaluation. The essential themes are at Annex 3.
- 13 The remainder of the themes that emerged are more properly to be regarded as **sub-themes** within the Key Areas of Knowledge Gaps and Delivery. For any sub-theme, corresponding initiatives can be identified and taken forward. It will not be possible to progress initiatives for all the sub-themes within the lifespan of the new Plan, and so it is necessary to identify priorities.
- 14 Criteria to prioritise the sub-themes are at Annex 4. The criteria were identified in syndicate and committee discussions. The sub-themes that emerged are as follows:

Prioritised sub-themes:	
Key Area: Knowledge Gaps	Key Area: Delivery
<ul style="list-style-type: none"> • Improve SME comprehension of H & S issues • Encourage companies to share information they hold on control measures • Benchmarking to identify good practice 	<ul style="list-style-type: none"> • Development of simple messages • Promotion of E-COSHH Essentials and COSHH Essentials • Creative and focused tool development • Development of different tools for different groups

- 15 The template for the proposed new Work Plan addresses essentially four types of issue:
- a) New work streams designed to bring about real improvements in the workplace arising from exposure to substances;
 - b) Continuing work streams;
 - c) Mandatory activities; and
 - d) Periodic Forward Looks / Horizon Scanning and adjustment of advice to HSC.
- 16 Specific initiatives will be identified for the sub-themes in the Key Areas of Knowledge Gaps and Delivery. Knowledge Gap initiatives will only be taken forward if there is confidence that they can be delivered. This will ensure that knowledge gathering is outcome focused. On the other hand, Delivery initiatives

can be progressed without the need for a corresponding initiative in Knowledge Gaps provided there is an existing evidence base against which to justify the proposed Delivery initiative.

- 17 A draft ACTS's Work Plan template filled with possible initiatives (and other work) is at Annex 5. This is an updated version of the one circulated earlier and contains ideas from Secretariat and a member of ACTS. We would welcome any other ideas from members during the meeting in November. A further version will then be circulated for final approval following the November meeting. HSE proposes that this version is then forwarded to the DG in support of ACTS reconstitution.
- 18 Following finalisation of the Work Plan, ACTS will need to consider what sub-groups it requires to support and take forward its work.
- 19 We suggest that ACTS members may wish to volunteer to be champions for specific initiatives – two or three members per initiative. HSE will assist with the project management. Members will meet as necessary to progress their chosen initiative, facilitated by HSE, for the duration of the project.

Communication Plans

- 20 Once the ACTS's Work Plan is agreed, a communication plan will be developed to publicise it with stakeholders. This will include a dedicated ACTS website. It will also be publicised through the website of the Toxic Substances Bulletin and through direct mail. The TSB interactive e-mail address will be used to encourage dialogue with stakeholders. Individual communication strategies will be an integral part of initiatives that are developed within the Plan.

Evaluation Plan

- 21 Individual evaluation strategies will be an integral part of the initiatives that are developed within the Plan.

Relevant Control Systems

- 22 Not relevant.

Consultation

- 23 There was consultation on the development of a strategic 4-year plan of work with ACTS at its last meeting.

Presentation

- 24 Once the Plan is agreed, it will be published on the HSE website.

Costs and Benefits

- 25 Costs cannot yet be quantified but there is no dedicated programme money. The Plan is likely to require active input from members if worthwhile progress is to be

made on all issues. Where possible, costs for development and delivery of the Plan will be borne by HSE within existing resources.

26 Benefits cannot yet be quantified. This Plan sees the emphasis of the work of the Committee shift from a narrow concern with limit setting to workplace focused outcomes. It is hoped that this will be accompanied by benefits associated with a corresponding reduction in the number of people being made ill from exposure to substances at work.

Environmental implications

27 None.

European implications

28 ACTS will continue to handle work with a European dimension in the Plan.

Devolution

29 Positive outcomes that result from ACTS Work Plan will benefit Great Britain.

Other implications

30 None.

Action

ACTS members are asked to:

- consider the proposal in paragraph 8 to adopt the revised Aim as the *raison d'être* of the Plan of Work;
- consider the recommendation at paragraph 5;
- consider whether 2 or 3 members should be nominated to present this Plan of Work to the HSC.

Contact

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ACTS STRATEGIC PLAN 2002- 2006: THE AIM

Our aim is to stop people being made ill from exposure to substances at work.

We plan to deliver this by:

- a developing appropriate, prioritised initiatives, which we can monitor and evaluate;
- b identifying and engaging with other people or organisations who can improve health outcomes in the workplace;
- c contributing to HSE's Chemicals Strategy, the delivery of goals and targets in HSC's Strategic Plan and by providing HSC with advice on emerging issues of concern; and
- d influencing the wider EU agenda so that it focuses on significant issues for workers, employers and other stakeholders in Great Britain;

Table of emerging issues identified in syndicate discussions

Change in the nature of chemical manufacturing
<p>– What are likely to be the changes in the short/medium/long term?</p> <ul style="list-style-type: none"> • Shift from production to selling solutions (e.g. move to final product, complete painted vehicle) • Global companies may no longer be engaging with CBI/CIA • Less corporate resource • Importance of EU and international markets • An industry representative considered that the REACH control of intermediaries could result in few employed in the UK (and the EU) but the environmental representative suggested that this was by no means certain • EU enlargement impact on competition • Increasingly global business • Tensions between countries that are users and those that are producers • Better data on the hazards posed by chemicals due to REACH
<p>– What are the associated consequences for ACTS and H & S?</p> <ul style="list-style-type: none"> • Impact of environmental concerns move to ban products • Safety of substitutes (e.g. for silica, mutagens) • Increased mechanisation/less worker exposure (production costs) • Reduction in product shelf life for formulated products • Increased interest in nanoparticles • User specification shift H&S responsibilities • Environmental economics • Higher volume and number of chemicals in disparate businesses • In EU, future chemicals strategy may result in several old “existing chemicals” not being supported and therefore in short term less chemicals may be on the market • Markets for safer chemicals increase as REACH delivers a framework for the move away from older chemicals with bad hazard profiles • More formulations in the workplace more difficult to assess risks • Demographics. • More women in the workforce • Increased unacceptability of individual risk
<p>– What are the technological changes likely to be?</p> <ul style="list-style-type: none"> • Bulk chemical manufacture subject to small incremental change in next 5 years • New technology represents risks to researchers • Possible increase in surfactants

The nature of the supply chain
<p>– What does the supply chain look like at the moment?</p> <p>[To explore this issue, the syndicate discussion group looked at the production, distribution and use of dichloromethane.]</p>
<ul style="list-style-type: none"> • Feedstocks and raw material produced in bulk by large, capital intensive operations. Production likely to be relatively well controlled. • Formulation of marketed product also likely to be relatively well controlled. • Each of the different stages of the process can be distributed throughout the globe. • Moving down the supply chain from bulk production, through to end use, increasingly harder to identify involved parties. • End users may use product for a variety of individual uses not anticipated by manufacturer/supplier nor covered in safety data sheets.
<p>– How will it change?</p>
<ul style="list-style-type: none"> • More international competition. • Large companies are breaking up (less vertical integration). • More movement of chemicals around the globe (e.g. in response to labour costs) • People at risk will increasingly have access to products that are generic (e.g. a store's own version of leading brand of paint stripper). Users need to be aware of the potentially harmful nature of the product's constituent ingredients, rather than a product's proprietary or generic name. • Need to address the lack of knowledge in the supply chain. • Cannot assume that there is in built responsibility in the supply chain, or where it exists, that the system works properly. • Increase in the number of self-employed. • Increase in domestic use of products.
<p>– What will be the associated consequences for ACTS and H & S?</p>
<ul style="list-style-type: none"> • The need for research to increase understanding of the supply chain. • The need to make interventions through non-regulatory intermediaries. • Accept the prevailing mixed soup of chemical users.
Change in the nature of chemical users
<p>– Background thoughts</p>
<ul style="list-style-type: none"> • Most of the major changes anticipated in the chemical industry have already taken place. • Currently, the chemical industry is in a period of consolidation. • Overall numbers of persons exposed to harm in industry is declining. • Environmentally driven exclusion of some chemicals will result in the introduction of new chemicals, which could expose workers to new risks.

<p>– What will be the change in nature of chemical users in the short/medium/long term?</p>
<ul style="list-style-type: none"> • Recycling (fridges, hospital equipment) and biotechnological developments are possible areas of concern. • Overall a movement towards the service industries and users who have not up until now been considered at risk. • Included are workers in florists, plumbers, leisure centres, shopping malls, and beauty parlours. • Movement to offer multiple services under one roof i.e. dry cleaning in supermarkets. • Peripatetic workers, maintenance people, home workers, those contracted out and operating as one-person businesses. (People like these have not as yet been monitored and as a consequence the current exposure data is zero). • Diversity agenda and rehabilitation is likely to introduce workers who might previously have been considered unfit to work – perhaps with respiratory problems or overall more susceptible to exposure. • Current exposure data tends towards measuring effects on healthy young men or pregnant women which does not reflect the predominance of women in the service industry or take disabled or more vulnerable workers into account. • Patterns of work changing dramatically away from a stable fixed workforce into a mobile workforce in short term contracts with consequential monitoring problems. • Examination of service industry work environments may reveal issues such as toxic products and mildews in what may previously have been thought to be ‘no risk’ environments. • Greater use of chemicals in the home with women being subject to greater exposure than men.
<p>– What will be the associated consequences for ACTS and H & S?</p>
<ul style="list-style-type: none"> • Closer examination of substances, which may cause ill health in the service industries with a clear agenda of prevention rather than reaction. • Emphasis required on the need for the NHS to be a full partner in any programme of work.
<p>Development of the regulatory system</p>
<p>– At national level, in the short/medium/long term?</p>
<ul style="list-style-type: none"> • Nature of usage is moving towards smaller. • Current system relies on setting OELs based on evidence. This is no longer as effective because of fragmentation/trend towards ‘smaller’

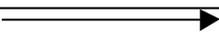
<p>– At European level, in the short/medium/long term?</p>
<ul style="list-style-type: none">• EU needs to be more joined up on the way it regulates on chemicals. DG Environment, DG Enterprise and DG Employment and Social Affairs do not coordinate as well as they should.• Occupational health implications of REACH (registration, evaluation and authorisation of chemicals)
<p>– At global level, in the short/medium/long term?</p>
<ul style="list-style-type: none">• Globalisation will increase.• The tensions between developed and developing countries will increase.
<p>– What will be the associated consequences for ACTS and H & S?</p>
<ul style="list-style-type: none">• The need for more industry/sector good practice guidance (emphasis on control measures rather than OELs).• Must not be too narrow. Need to look at process-generated substances as well as supplied products.

Essential themes – to be incorporated in project plans for any initiatives ACTS takes forward.

Key Area: Delivery

- Evidence base for an activity / initiative
- Utilises partnerships / intermediaries
- Outputs necessary to achieve outcome
- Development of a targeted communication / awareness raising strategy, including:
 - use of simple language in all delivery mechanisms
 - piloting messages on target audiences
- Resourcing

Key Area: Evaluation

- Evaluation 
- Success criteria – targets for activity / initiatives, incorporated into evaluation plans
- All evaluation plans milestone to ensure ongoing evaluation
- Success of communication / awareness raising strategies, including behaviour modification
- Evaluation plans should cover success of control measures (where applicable)
- Should be fit for purpose
- Evaluation plans should facilitate continuous improvement

Criteria for prioritising sub-themes

- Outcome focused:
 - contributes to RHS, SH2 and HSC's Strategic Plan
 - contributes to HSE's Chemical Strategy
- Direct positive effect on improving workers health and therefore workforce availability
- Maximum impact on the maximum number of people
- Ability to evaluate
- Ability to resource

Draft ACTS Work Plan 2003 - 2006

Initiative

**Year 1
2003
Year 2
2004
Year 3
2005
Year 4
2006**

Encourage companies to share information they hold on control measures

Asthma action plan: develop a “safety by design” approach to processes and design to eliminate potential for exposure. (para 6 of ACTS/47/02 refers).



Continue work on developing “safety by design” approach.

Encourage companies to share information they hold on control measures.

Identify good practice done by others that could be shared.

Develop a project plan to share good practice.

Implement plan to share good practice.



Benchmarking to identify good practice

An initiative on dermatitis. Establish evidence base for initiative.

Establish evidence base for initiative.

Draft ACTS Work Plan 2003 - 2006

Draft project plan for initiative.



Progress activity detailed in project plan.

Evaluate progress at agreed milestones. Adjust activity as necessary.

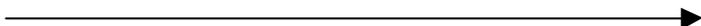
Continue progressing activity detailed in project plan.

Evaluate progress at agreed milestones. Adjust activity as necessary.

Evaluate initiative. Adjust evidence base as necessary.

Development of simple messages

An initiative to deliver programme 5 of asthma project plan – delivery of messages particularly peer review of asthma web page (ACTS 47/02 refers)



Continue initiative to deliver programme 5 of asthma project plan.

Promotion of E-COSHH Essentials and COSHH Essentials

Develop project plan to promote E-COSHH Essentials.

Implement project plan to promote E-COSHH Essentials.



Creative and focused tool development

An initiative to develop a website for ACTS in order to raise awareness of ACTS' work – to include development of a slogan to explain purpose of ACTS

Draft ACTS Work Plan 2003 - 2006

Eg **ACT**ion**S**ubstances



Creative and focused tool development

An initiative to deliver programme 5 of asthma action plan: COSHH essentials style sheets and programme 2.1 quality guidance (ACTS 42/02 refers)



Continue an initiative to deliver programme 5 of asthma action plan: COSHH essentials style sheets and programme 2.1 quality guidance

Development of different tools for different groups

Programme 1.2a of asthma action plan: An initiative to develop a tool kit to combat latex allergy (ACTS/42/02 refers)



Continue with Programme 1.2a of asthma action plan: An initiative to develop a tool kit to combat latex allergy (ACTS/42/02 refers)

Improve SME comprehension of H & S issues

Draft ACTS Work Plan 2003 - 2006

An initiative to identify intermediaries that can help improve SME comprehension of H&S issues.

An initiative on dichloromethane in paint stripping products.

In this example, it is assumed that there is a pre-existing evidence base to justify an initiative in this area.

Draft project plan for initiative.

Progress activity detailed in project plan.



Continue progressing activity detailed in project plan.

Evaluate progress at agreed milestones. Adjust activity as necessary.

Evaluate initiative. Adjust evidence base as necessary.

Draft ACTS Work Plan 2003 - 2006

Additional areas

Year 1
2003
Year 2
2004
Year 3
2005
Year 4
2006

Continuing work streams

OEL framework review



OEL framework review

Mandatory activities

Preparation of EH40 for changes to the OEL framework

2nd IOELV Directive



2nd IOELV Directive

Periodic Forward Look / ajustement of advice to HSC

Forward Look



Draft ACTS Work Plan 2003 - 2006

Forward Look

Forward Look

Forward Look