Advisory Committee on Toxic Substances Minutes			ACTS/MIN/3/2010
Meeting date:	24 May 2011	Open Gov. Status:	Open
Type of paper:	Above the line	File ref:	2011/311748
Exemptions:	None		

Advisory Committee on Toxic Substances (ACTS)	
Minutes of the 98th meeting of the Advisory Committee on Toxic Substances held on 24 May 2011 at the Health and Safety Executive, Birmingham.	
Present: Jane Willis - Chair (HSE) Robin Chapman – CBI Ian Carney - CBI Alastair Hay - TUC Bud Hudspith – TUC Susan Murray - TUC Elspeth Metcalfe - Independent Ian Brown - Independent **Apologies:** Roger Alesbury - CBI Len Levy - Independent Rob Miguel - TUC	**Officials Present:** Kären Clayton - Director, Long Latency Health Risks Division (LLHRD) Gill Smith - Secretariat Tim Fry - Secretariat John Osman – Corporate Science, Engineering & Analysis Directorate (CSEAD) Steve Fairhurst (as WATCH Chairman) – Chemicals Regulation Directorate (CRD)
Presenters Item 3: John Osman. Item 4: Steve Fairhurst. Item 5: Tim Fry	

Item	
1	**Introductions and apologies**
1.1	**People**
	The Chair welcomed members to the 98th meeting of the Advisory Committee on Toxic Substances (ACTS) and introduced John Osman, Steve Fairhurst and Tim Fry. Apologies were received from Roger Alesbury, David Tolley, Len Levy and Rob Miguel.
2	**Agreement of minutes/matters arising**
2.1	The minutes of the 97th meeting were formally accepted. The Chair advised ACTS that HSE had had a request from a journalist to see the notes of the committee's discussions immediately after the meeting. She reminded them that the usual process is to circulate the draft minutes to them after the meeting to give them the opportunity to comment on them. It was confirmed that the minutes are openly available once agreed. The members agreed that they would expect to see the draft minutes and have the opportunity to comment on them before they are released to anyone else.
2.2	**Update on matters arising (ACTS/1/2011)** ACTS noted the progress made. **Current Issues**
2.2(i)	Ministerial Statement – Good for Health and Safety - Good for Everyone

	Members were sent a link to the DWP document but in brief: • HSE is already working to deliver this new approach to reforming health and safety. • Changes will include: o Targeted inspection o Fees for intervention (from next April) o Prioritised engagement with sectors • High hazard sites will still be inspected • The categorisation of sectors in the statement was informed by HSE's Strategy implementation work. Points raised in the discussion were: • Hazardous substances are used in many industries that have been deemed to be of overall "low risk"; the risk might not be low for a specific chemical exposure and the culture and understanding in such industries might not be conducive to good control. • It should be remembered that the chemical sector includes companies that use chemicals not just those that manufacture them and this needs to be recognised in the relevant sector implementation plan. • The focus in the statement is heavily weighted towards safety; this needs to be better balanced with significant health issues of concern associated with exposures to hazardous chemicals. • There is no recognition of equality issues in the statement. • ACTS has consistently advised that effective communications are key to tackling many of the work related ill health issues by securing appropriate understanding and behaviours. • Measures of success need to be identified and progress towards their achievement measured. • Proactive inspection does not preclude investigation of incidents that meet HSE's investigation criteria nor some proactive activity e.g. Safety and Health Awareness Days or partnership working. • HSE has a mixed model of interventions for raising awareness and encouraging behaviour change for health issues: e.g. communications, awareness training as well as inspection/enforcement. • 'Good for Health and Safety - Good for You' will have a big impact on HSE.
2.2(ii)	<u>HSE Guidance review</u> • HSE is reviewing its guidance/website material to support HSE's strategy goal to help small businesses comply with the law. • Changes will not devalue the importance of occupational health and safety. • The Infoline information service will end on 30 September 2011. • Health and safety information will be accessed primarily via the HSE website. • HSE will continue to provide information in a range of ways. • From 12 September 2011, the way in which businesses report accidents and injuries under RIDDOR will move to a predominantly on-line system. • There will continue to be a telephone service to report fatal injury incidents. Points raised in the discussion were: • If guidance were proposed to be removed, ACTS should be played into the process as part of the consultation process; the social partners have important perspectives on the reliance of others on particular pieces of guidance. • There are alternative means of delivery of HSE's information e.g. Citizens Advice Bureaux and libraries: these are useful for those that do not have access to

	• TUC's experience is that people want to talk and receive reassurance when they have a question i.e. it is not all about written information. **Action Point 1: Jane to feedback to Heather Bolton/FASe programme about ACTS concerns regarding access to health and safety information for those without computers – particularly employees and small businesses.** **Action Point 2: Jane to feedback the results of the Board's discussions on the review of guidance (HSE/11/31, 25th May Meeting) and the secretariat to forward the Board meeting minutes when available.**
2.2(iii)	<u>IOM Statement</u> HSE has received a statement on occupational exposure to Dust issued by the Institute of Occupational Medicine (IOM); HSE has also been approached by a journalist for a statement on the same subject; responses are being prepared in consultation with HSE's specialists. Points raised during the discussion were: • Since the last meeting of ACTS the HSE Board had discussed a paper on HSE's work on respiratory diseases and agreed not to pursue a revision of the "low toxicity dust" airborne concentration thresholds that trigger the application of COSHH ("nuisance dust") values as there was insufficient evidence at this time to warrant this. • Members were very disappointed by this decision and considered that the Board have failed to address the issue of reducing occupational exposure to dust. Members are convinced that an "all dust" campaign is the most appropriate way to address occupational lung related ill health issues. • It was suggested by some members that the important issue and priority for action was to do more by way of education about the risks; to get the message across and change attitudes about the current trigger values (often referred to as "limits") for those companies who currently are unaware of their obligations. Focusing only a change of the trigger values for "low toxicity dusts" would affect those companies who already obey the current legal requirements but make no difference to those who are ignorant on this issue. • Some members noted, whilst acknowledging the importance of communication, that there was evidence that the current trigger values for "low toxicity dusts" were unsafe, and were putting workers at risk. They had real concerns about this and believed that the IOM document provided confirmation of the evidence. • Other members commented that responsible companies were already trying to work below the current values. • It was reported that recent work in Germany suggested German limits were being revised to lower levels; HSE asked members to share any further information they had on this or other similar work. • HSE undertook to consider any further new information that emerges on this issue and will keep the Board and ACTS informed. • HSE has commissioned research attempting to identify the scale and causes of chronic obstructive pulmonary disease (COPD) in the UK, using the UK Bio Bank.
2.2(iv)	<u>Asbestos</u> • **Infraction by European Commission** A complaint to the European Commission in 2006 alleged under-implementation of

	European Directive 2003/18/EC by the UK. The European Commission investigated the complaint and in, February 2011, issued a reasoned opinion that the omission of certain phrases ('*non-friable*' and *'without deterioration of non-degraded materials)* in the Control of Asbestos Regulations 2006 (CAR06) had widened the scope of a derogation on low-risk work beyond that in the Directive. The UK Government responded in April, confirming the UK's acceptance of the reasoned opinion and, as a result, legislative changes are now required to include the omitted terms from the Directive in domestic law. HSE is currently considering how this can best be achieved. As with any proposal to change legislation, a public consultation will be held. This is likely to be in the late summer of 2011. **Action Point 3: Secretariat to send copies of the consultation document to members when it is made available.** • **Classification and Regulation of chrysotile asbestos** In the later half of 2010, an approach was made to the Secretary of State regarding the classification of chrysotile asbestos, particularly when used in asbestos cement. The Secretary of State asked Sir John Beddington, the Government's Chief Scientist, to consider if there is any evidence that would justify an imminent change to the international scientific consensus on the classification of asbestos. HSE understands that the investigation has been completed and the results are expected to be published shortly on the Go-Science website. **Action Point 4: Secretariat to alert members when the results of the investigation are made available. *[Completed]*** <u>Indicative Occupations Exposure Limit Value (IOELV) Directive</u>
2.2(v)	• Clearance to consult on the implementation of the directive is being sought from the Cabinet Office. • The Impact Assessment has been updated to take the new scrutiny process into account. **Action Point 5: The Consultation Document to be circulated by the secretariat to members when cleared. *[Completed]*** <u>REACH</u>
2.2(vi)	• The first deadline for REACH registration of the highest tonnage substances (1000 tonnes or more per year) passed in **December 2010**. • The next deadline for registration (substances manufactured or imported in quantities of 100 tonnes or more per year) **is June 2013.** • The first six 'substances of very high concern' (SVHCs) have been made subject to the REACH 'authorisation' process. • Along with DEFRA, the UK REACH Competent Authority team is considering its approach to the REACH 'substance evaluation' mechanism, which will begin in 2012. Planning is in its early stages. • HSE is planning for measures to enact a permitted derogation from the new EU restriction on the use by professionals of paint-strippers containing dichloromethane. • Under the implementation programme, the European Chemicals Agency (ECHA)

	• The UK semiconductor industry has objected to the re-classification via its European trade association. Members noted that they had received feedback from stakeholders that the voluminous nature of the material safety data sheets was proving to be very difficult for users to manage effectively and was undermining the intended health and safety objectives for their use. However, members also noted the level of information now being provided is precisely what REACH was set up to achieve and the production of additional intermediate levels of documentation would place an extra burden on industry.
3	**The Burden of Occupational Cancer in Great Britain**
3.1	Dr John Osman gave a presentation detailing the background to the project, some details on methodology, and some results in terms of current and future burdens of cancer. He noted that the final publication on the future burdens data was due to be published at the end of this year. There was a lengthy discussion following this presentation, key points raised were: • ACTS members noted the quality and value of the work and congratulated HSE for taking it forward. • The future burden work is particularly important and highlights that action needs to be taken as soon as possible to reduce incidents of occupational cancer in the future. • The constraints of using IARC definitions of carcinogens were noted. • The absence of angio-sarcoma and vinyl chloride data was noted. • Members also noted the limits on predicting the effects of interventions because of not knowing where estimates of exposure were on the dose response curve, particularly if at least some of the curves were sigmoidal, rather than linear, in shape. This might lead to variable reliability of estimates of future impact of interventions for the agents studied. Issues such as bias and uncertainty will be addressed as part of the project. • It must be borne in mind that the work on future predictions is based on models, not established reality. There is considerable variation in the reliability of different pieces of evidence, e.g. the robustness of asbestos-induced mesothelioma data, compared to figures for various potential causes of cancer at other sites in the body. Such modelling is useful and gives valuable projections of what *might* happen if circumstances are maintained or changed – but the predictions should not be taken as being necessarily correct. • The methods used in this research are now being applied across the health and safety community in the EU and world wide. • The assumption of a 33% compliance figure for the current WEL for silica is estimated based on the best information HSE has. • HSE is developing a communications strategy to encourage in debate over the research findings and ACTS will be involved in that debate. • The data is for everyone in the occupational health and safety system to use not just HSE. • Cancers associated with shift work were linked to breaks in circadian rhythms i.e. night shifts rather than the whole range of shift work patterns. They contribute significantly to the estimated burden of work-related cancer in females, but the association is not proven to be one of cause and effect as yet; HSE has commissioned further research in this area.

	Action Point 6: John Osman to check why data on angio-sarcoma caused by vinyl chloride monomer exposure is absent **Action Point 7: Secretariat to let ACTS members know when papers and publications are available.** **Action Point 8: Secretariat to forward the presentation to members. *[Completed]***
4	**ACTS and WATCH interface**
4.1	Dr Steve Fairhurst gave feedback on the recent and current work of WATCH Points raised during the discussion were: • To justify the HSE resource input and the value of WATCH output, substantive WATCH issues have to align with HSE priorities. • The ToR for WATCH identify it as a subgroup of ACTS; most of the work feeds to WATCH via HSE, rather than via ACTS. The HSE Board is the customer for both committees. • WATCH is valued for its wide technical expertise; its non-HSE membership which gives it a degree of separation from the policy perspective. • Under REACH, WATCH might have some input to substance evaluation; it is more difficult to see a role for WATCH in relation to establishing setting DNELs and DMELs, as this is an industry responsibility. • Communication should flow in both directions, ACTS to WATCH requesting scientific assessments and WATCH to ACTS feeding through the results of its work. • A member commented that it was important to see that the work WATCH did on issues was leading to regulatory action and resulting in outcomes. **Action Point 9: ACTS and WATCH secretariats will coordinate sharing of information between the groups e.g. meeting notes**
5	**Carcinogens and Mutagens Directive (CMD)**
5.1 (i)	Tim Fry gave a short presentation outlining: the background to work the EU has commissioned to prepare a proposal to revise the Carcinogens and Mutagens Directive. Members' views were sought on a number of questions. It was stressed that this work is at a very early stage, but that it is Government policy to influence EU discussions at an early stage. General points made in the discussion were: • Some members noted that a CMD was needed specifically for non-threshold carcinogens and mutagens, where a "safe" threshold dose cannot be identified. • ACTS want to be involved in the process and would want to hear WATCH's views on the technical dossiers as they become available. • It is unclear how the practicalities of a revised process would work e.g. would it be SCOEL who provide the scientific assessment and accompanying technical documentation or some other central group? • Although some interested parties are in favour of QRA the extrapolation from high to low dose provides a very insecure basis for limit setting. • High dose effects do not always present at low doses due differences in biochemistry seen in overload/high dose situations. • Members noted that some of the candidate chemicals were already well controlled and that the selection for inclusion on to a revised directive should focus on which substances were not controlled. • Although combining CAD and CMD directives would be a positive move, it should also be remembered that REACH already covers much of this territory. • The UK implements the current CMD and CAD via one instrument i.e. COSHH

	• Members noted that reproductive toxins, as agents with a threshold of effect, did not sit conceptually under a scheme designed to regulate non-threshold agents. CAD would seem to be the scheme to regulate these toxins. Members were also asked to provide comments and views in writing by **7th June;** in time for the next Working Party on Chemicals meeting in Luxembourg. **Action Point 10: Tim Fry to liaise with WATCH and ACTS secretariats to set up a process to gather the committees' views on future documentation and processing.**
6	**AOB**
6.1	**ACTS membership** ACTS members noted that there were extant vacancies for both TU and CBI places plus others which may arise. Clarity on how to fill these places was needed in light of the current position on the reconstitution of ACTS. **Action Point 11: Jane Willis to talk to Geoffrey Podger and Judith Hackitt to identify a way forward**
7	**Next meeting**
7.1	Location and Date The next meeting will be in the Autumn probably in October or November. Members agreed they favoured Birmingham in preference to Bootle as a location to meet. **Action Point 12: Secretariat will ask for availability for the next meeting in Birmingham**
7.2	Future Agenda Items • Metal Working Fluids – new formulations are being marketed and there is a continuing problem; there have also been concerns raised about the potential to cause lung cancer. An update from HSL on the work of the MWF programme would be helpful. • Flour Dust – There are issues over new finer formulations and also the use of oils to address dustiness. In addition, are these new mitigation approaches in the flour industry applicable more widely? An update from HSL on work on this would be welcomed.
8	**Summary and Close**
8.1	The Chair thanked everyone for their attendance and participation.