2.4 Prioritisation of issues

WATCH members felt that the twelve topics should be regrouped into nine themes and on the basis of this new grouping prioritised the themes. The three highest priority issues were considered to be:

(i) Future impact on hazard classification and risk management (OELs, risk assessment, COSHH Essentials) of chemicals resulting from the implementation in the EU of the envisaged new legislation on chemicals known by the acronym REACH and the Globally Harmonized System of classification and labelling of chemicals, known as GHS (includes topics 3, 5 and 10 as described in WATCH/2005/19 Annex 1).

(ii) Developing a strategy for evaluating the effectiveness of Workplace Exposure Limits and the effectiveness of risk management achieved using generic control approaches i.e. COSHH Essentials (includes topics 1 and 9 as described in WATCH/2005/19 Annex 1).

(iii) Development of improvements in and/or guidelines for exposure data assessment (topic 12 as described in WATCH/2005/19 Annex 1).

2.5 In accordance with the agreed procedure for this item, for those topics deemed to be of the highest priority the Chairman then asked WATCH members to recommend:

(i) what action needs to be taken?
(ii) how might that action be carried out?
(iii) which individual/organisation is most appropriate for taking the action forward?
(iv) what is an appropriate timeframe for this action?

2.6 Impact of REACH and GHS on classification and risk management

It was felt that this topic was of greatest priority. A WATCH member commented that in his opinion the introduction of REACH and GHS would have a significant impact on current approaches used to manage risks from chemicals in the workplace. The adoption of the GHS scheme will result in changes to SDSs, new symbols and labelling phrases in the workplace, new hazard classifications that will impact on COSHH Essentials and conflict between or duplication of requirements under different pieces of legislation, e.g. between REACH and the Chemical Agents Directive. Another member commented that in his opinion risk management under REACH could require the consideration of appropriate control regimes for approximately 30,000 substances and the derivation of Derived No-Effect Levels (DNELs) for each of them. It was important to identify the body responsible for influencing developments and activities in these areas.

2.7 In reply another WATCH member said that his understanding was that under REACH the responsibility to classify and conduct risk assessments will lie with companies who are placing the substances on the market. Much of the work required to classify and apply appropriate symbols and safety phrases will be prescribed by EU Competent Authorities (CAs). However, derivation of DNELs is a change from existing requirements and input into the negotiation of how this is done may be valuable. The derivation of DNELs will influence regulatory decisions across all sectors of the human population potentially exposed to a substance and the need for a UK government-wide approach to exert influence in this area was highlighted by another WATCH member. It was felt that WATCH could help with future discussions on deriving DNELs and the approach used for human health risk assessment under REACH.

2.8 A further comment was made that more consideration needs to be given to translating the information that will be provided by REACH, and the GHS classification scheme, into workplace protection. Therefore, guidelines on how chemical users should interpret and implement such information will be required.

2.9 The Chairman then reminded members that no decision by UK government about HSE’s involvement (with the
Environment Agency) in the delivery of REACH had yet been taken. He said that it would be appropriate to await this decision before determining how best to further these issues. He suggested tabling an agenda item for the February 2006 WATCH meeting describing the latest position on REACH, the agreed CA structure for the UK (assuming that this would be known by then), who the key players are and where the difficult issues are likely to arise. A WATCH member suggested that regardless of the CA decision, under REACH issues related to the occupational situation might still need to come to WATCH.

[**ACTION:** HSE to produce a paper describing the latest state of play on REACH and the agreed UK CA structure (assuming that this would be known by then) for the February 2006 meeting.]

| 2.10 | WATCH members then thought that it might be a good idea if WATCH could discuss the issues raised with the key players involved in REACH negotiations at the February meeting. One member qualified this by commenting that the scale of this topic might merit a dedicated meeting. The Chairman responded by suggesting that at the February WATCH meeting members should discuss the latest state-of-play on REACH and the issues involved. Following this, if it seemed appropriate, a stand-alone meeting could be arranged at which the issues could be explored in-depth and discussed with some of the key players. |
| 2.11 | As it is likely that negotiations on REACH will be moving quickly, but WATCH only meets three times a year it was felt by members that REACH issues may arise and be finalised before WATCH has chance to respond. The Chairman therefore proposed that if, after the analysis in February, it seemed appropriate, a system could be devised allowing WATCH members to provide their perspectives and input into issues arising between WATCH meetings. There was agreement from members to this potential course of action. |
| 2.12 | **Evaluating the effectiveness of WELs and COSHH Essentials**  
WATCH members felt that the timescale for this theme was not as urgent as priority (i). A WATCH member described the need for a piece of research to be performed in order to gather the necessary data to compare the stringency and adequacy of workplace control achieved using the new Workplace Exposure Limit (WEL) system with the control achieved using the old Occupational Exposure Limit (OES/MEL) system. The proposal to evaluate the WEL system could focus on the seven criteria developed by the OEL Framework Group which it was intended would be satisfied by any new OEL system. An HSE member added that the proposed research would provide a picture of what is happening currently within the workplace, giving an insight into people's understanding of the systems, the types of control measures being used and whether or not working conditions are conforming to what is recognised as Good Practice. Additionally, on the basis of this information, forecasts about what might happen in industry in the future might also be facilitated. |
| 2.13 | Another WATCH member thought it was important also to consider those substances that previously had an OES but do not, under the new system, have a WEL, in order to understand how people are now controlling these substances. In response to a question, the Chairman reminded WATCH about the commitment by HSE to review 15 or 16 substances with WELs that formerly had MEL status but said that there were no plans to expand this exercise to include additional substances. |
| 2.14 | A further WATCH member thought that any research performed on the new WEL system should be structured by size of sector and company to obtain a more precise picture of occupational behaviours. |
| 2.15 | The Chairman indicated to WATCH that HSE had no current plans to undertake such a piece of work; if WATCH felt that it should be done then the onus was on the Committee to advocate and scope the research in a submission to HSE. There was agreement from WATCH members that a research specification should be drafted by a small group of 2-3 WATCH members led by Prof. Len Levy. The specification would then be submitted to HSE by the end of January 2006.  
[**ACTION:** Prof. Levy to chair a small drafting group of WATCH members to prepare a research specification by the end of January 2006. ] |
| 2.16 | **Exposure data assessment**  
A WATCH member commented that the quality of exposure data is a recurring problem, affecting the
interpretation of epidemiological studies and the consequences of such interpretation for limit-setting processes, the assessment of priorities for control and the choice of risk management measures. He indicated that several options are available in order to address this problem. One might be to improve the EASE model for exposure prediction. Another member commented that this idea was explored last year at a meeting at the Institute of Occupational Medicine but at that time it appeared that no money was available to develop the ideas. An HSE member commented that in order to further develop EASE, which is an exposure prediction system designed for EU-wide use, a new database of exposure information including data from other European countries would be required to obtain a sufficiently large dataset to facilitate improving the system in a robust, reliable manner. He explored this idea further by suggesting that the way forward was firstly to collect all existing data into a central data set. Secondly, he felt that consideration should be given to how best to combine the real-life data, with data obtained from exposure models, in a system which could deliver the most reliable exposure assessments possible.

2.17 A WATCH member indicated that information about the context (i.e. under what conditions) the exposure data was collected was needed in order to be able to interpret exposure data properly. Two WATCH members indicated that there were a number of initiatives currently ongoing to try to address this issue in Europe, including within industry. An HSE member also indicated that HSE was currently looking into how HSE could improve its intelligence gathering by combining HSE-gathered exposure information with that obtained from external stakeholders. The Chairman then proposed that a short state-of-play paper should be prepared for the February 2006 WATCH meeting. WATCH members agreed to this approach.

[ACTION: HSE to prepare a paper of the ongoing initiatives to improve exposure data assessments for the February 2006 WATCH meeting.]

2.18 Discussion on the remaining themes
To complete the agenda item the Chairman then invited members to provide brief comments on the remaining themes considered to be of lesser priority. Two issues were identified particularly as warranting attention:

2.19 Firstly, a WATCH member noted that the current WEL for beryllium of 0.002 mg/m$^3$ (8-hour TWA) may warrant early re-consideration, given the availability of new evidence to suggest that workers might be adversely affected at levels lower than the current UK standard and the proposed further reduction of the ACGIH TLV to 0.00002 mg/m$^3$ (8-hour TWA). Further details on this issue were described under topic 7 in WATCH/2005/19 Annex 1.

2.20 The second issue was raised by another WATCH member, who noted that substitution decisions could potentially lead to the introduction of alternative substances that may cause different, but significant, health effects in comparison with the substance being replaced. Examples of this issue have been described under topic 8 in WATCH/2005/19 Annex 1.

2.21 The Chairman noted these comments. He thanked the ad-hoc WATCH members for their useful contributions to this item. The content and output from this session would be captured in an ‘new and emerging issues’ report from WATCH into HSE’s ‘horizon-scanning’ system; and the information would also be fed into the thinking about HSE’s future agenda on chemicals and ill-health.