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**HEALTH AND SAFETY EXECUTIVE**

**CONSTRUCTION INDUSTRY ADVISORY COMMITTEE (CONIAC)**

**Update for CONIAC on the Sector Occupational Health Work**

**A paper by the CONIAC Secretariat**

**Cleared by Stephen Williams, Chief Inspector of Construction**

**Summary**

For information only

**This paper informs Members of the current position with Construction Sector occupational health activity - the Supply Chain Initiative and the Construction Occupational Health Management Essentials (COHME) web-based guidance, each of which aims to reduce ill health in construction.**

**Issue**

1. Update on Sector occupational health work: COHME and ill-health reduction work via the supply chain.

**Timing**

2. Routine

**Recommendation**

3. That CONIAC Members note the information in this paper.

**Background**

4. The Occupational Health Unit of the Construction Sector is a small team which focuses on the reduction of work-related ill health in construction. It's two main current work strands are:
  - Construction Occupational Health Management Essentials COHME <http://www.hse.gov.uk/construction/healthrisks/index.htm> – providing a single point of access to HSE guidance on the management of occupational health risks in construction.

- The supply chain initiative: which aims to work with key industry stakeholders to find practical ways to reduce to specific occupational health risks, to publicise these solutions and to ensure they are implemented by the industry.

## **Current position**

### 5. Supply Chain Initiative

The process was devised and developed by the Construction Sector Occupational Health Unit who manage the initiative. Coordinators who run the different strands of work, include Sector staff, operational inspectors and policy staff from the Disease Reduction and Manual Handling Programmes. Currently the initiative has five elements which are targeted at key areas to reduce days lost from ill health in construction. These are:

### 6. Reducing manual handling of heavy paving

**Aim:** To reduce the incidence of manual handling of paving materials by moving from a situation where the majority of (heavy) paving materials are laid by hand to one where mechanical laying is the industry norm.

**Progress:** Key Stakeholders have been identified and engaged and invited a forum to be held in November 2008. There has been a positive response from key stakeholders and the event is now fully booked. HSE and industry speakers will present at the event. Apart from looking at handling of paving materials this will also afford the opportunity for reminding dutyholders of the need to mechanically handle kerbs.

### 7. Reducing handling of heavy blocks (Masonry Units)

**Aim:** To identify practicable interventions and lead on their implementation to reduce or eliminate the risk of musculoskeletal injury caused by the repetitive use of heavy masonry units.

**Progress:** Key Stakeholders were identified and engaged and attended a Forum held in January 2008. A Working group from industry has been formed and has met to develop guidance for industry. The most recent HSE guidance depended on two person handling of blocks that weigh over 20kg. This guidance has not been adopted by industry as it appears not to work very well. The working group are considering what can take the place of this previous guidance. An ergonomic review of current practice and research has been undertaken. A good practice guide for designers, guidance for workers and SMEs are planned. The HSE Construction Information Sheet regarding blocks will also be revised. These outputs are planned to be in place by January 2009.

### 8. Reducing handling of Panel products e.g. plasterboard

**Aim:** to encourage the use of mechanical lifting aids in the handling of panel products (e.g. plasterboard);

A new coordinator has started work on this project. He has begun to identify and engage key stakeholders ahead of holding a Stakeholder Forum meeting to be held in March 2009.

#### 9. Reducing exposure to silica in kerb and block cutting

Aim: To increase good practice within kerb, paving and block cutting by establishing an agreed control hierarchy and specifying clear guidelines when the use of water suppression and respiratory protective equipment must be used.

Progress: A Stakeholder Forum was held in February 2007 this led to the formation of a working group representing the construction industry and their suppliers. A number of outputs resulted; these include a leaflet, "Time to clear the air" (HSE Books Misc830), a DVD showing good practice and the production of "paver markers" which carry a health and safety message.

About 238,000 of HSE's 'Time to clear the air!' leaflets have now been ordered by stakeholders and nearly 1000 'Time to clear the air!' DVDs and 8000 paver markers. This includes 2000 markers distributed to the Builders Merchants Federation. Many stakeholders in contract firms and local authorities have undertaken to provide information to their workforce through training and toolbox talks. For example Kier will make 100 copies of the DVD for distribution through their organisation; Norfolk County Council held meetings with management and trade union safety representatives. We are also receiving comments on observed changes in behaviour towards greater compliance with good practice.

Following the successful ministerial launch of the Kerb Cutting Initiative on 6 May 2008 the first evaluation meeting was held on 16 September. The major outcomes reported at this meeting were as follows:

- Interpave (British Pre-cast Concrete Association) guidance "Cutting Paving" produced as part of the project is now receiving 150 downloads a month and the DVD has been downloaded 524 times from You Tube.
- 90,000 people have accessed a news article on the project from pavingexpert.com
- A supplier of water bottles reported an increase in demand from under 2000 to over 6000 immediately after the launch event.
- Manufacturers of the water bottle are progressing with changes to the design and capacity.
- Hire Association Europe will advise members that water suppression should be offered to hirers of disc cutters. One (Mark 1 Hire) is evaluating the possibility of offering water suppression free to hirers.
- Feedback is indicating that the project is now embedded within various construction sector associations. For example a working group member was informed at a meeting of the construction client group, that the subject need not be explained as the issues were now well known.
- Continued promotion through news articles and presentations (eg Surveyor Magazine).

The Hard Landscape Training Group (HLTG) is also considering offering training targeted at the Local Authorities and their term contractors. This will involve modification of the current course content to include a session on wet cutting.

Interpave will recommend that this course covers cutting blocks, flags and kerbs (if it does not already do so) in line with the current Interpave guidance. HLTG have not yet agreed to this but if they do, HSE will assist in the promotion of the new course content.

#### 10. Use of lifting aids for heavy drainage products

Aim: to promote the use of lifting aids in construction, for example: heavy drainage products (gully pots, manhole covers and frames) or heavy lintels.

Progress: Due to staffing constraints, this strand has made no progress beyond making contact with major manufacturers of these products. It is expected that this work will be resumed within the next three months.

#### 11. Construction Occupational Health Management Essentials (COHME)

This web-based guidance was published in February this year and has been generally well received. In response to feedback about the website, an additional page, clarifying the role of the CDM Coordinator has been added and a number of minor modifications have been made.

A high early number of website hits of 44,420 in February decreased over the first four months but was maintained at over 12,000 per month (figures not yet available for July onwards).

It is intended that COHME will be kept up-to-date and be expanded with new information. The first area for further development will be the pages for designers.

Sector invited designers to comment on COHME and contribute to its development at a Designer Workshop, held in Rose Court on 26 September. The event was attended by over 30 designers, including architects, civil engineers and surveyors. Sector staff will develop the material collected at the event and work with those who have expressed an interest in contributing to produce material for designers to be added to COHME.

A new section on lead is to be drafted later this year.

Further information on health surveillance is to be added, directly and by adding links to relevant parts of the Constructing Better Health website which sets out detailed standards for health surveillance in construction.

The case studies included in COHME have proved particularly popular. CONIAC members are asked to consider whether they can provide further examples for inclusion.

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