

ST6

COSHH essentials for stone workers: Silica

Slate splitting (Manual)

Control approach 2 Engineering control and Respiratory protection equipment (RPE)

The Control of Substances Hazardous to Health Regulations 2002 (COSHH) require employers to ensure that exposure is prevented or, where this is not reasonably practicable, adequately controlled. This guidance gives practical advice on how this can be achieved by applying the principles of good practice for the control of exposure to substances hazardous to health, as required by COSHH.

It is aimed at people whose responsibilities include the management of substances hazardous to health at work (eg. occupational health specialists, anyone undertaking COSHH assessments, and supervisors). It is also useful for trade union and employee safety representatives. It will help you carry out COSHH assessments, review existing assessments, deliver training and supervise activities involving substances hazardous to health.

This guidance is issued by the Health and Safety Executive. Following the guidance is not compulsory, unless specifically stated, and you are free to take other action. But if you do follow the guidance, you will normally be doing enough to comply with the law. Health and safety inspectors seek to secure compliance with the law and may refer to this guidance.

See Essential information near the end of the sheet.

What this sheet covers

This sheet describes good control practice for the exposure to Respirable Crystalline Silica (RCS) dust when manually splitting slate.

It covers the key points you need to follow to reduce exposure to an adequate level.

Follow all the points, or use equally effective measures.

Main points

- Splitting, separating and closing slates create local jets of fine dust containing RCS.
- Manually splitting slate can create high levels of dust containing RCS (slate contains 20–40% crystalline silica).
- Stacking slates is also a significant source of exposure to stone dust containing RCS.
- Contaminated work clothing may also be a source of dust exposure.
- Air sampling may be needed to show that control of exposure to RCS is being maintained.
- Provide health surveillance when workers are regularly exposed to RCS dust and there is a reasonable likelihood that silicosis may develop.

Hazards

- ✓ RCS is also known as alpha-quartz, cristobalite or ‘free silica’, and can be wrongly labelled as ‘amorphous silica’.
- ✓ RCS is hazardous by inhalation as the ‘respirable’ dust, which is very fine and invisible under normal lighting, can get deep into the lungs.
- ✓ The workplace exposure limit for RCS is detailed in HSE publication EH40/2005 Workplace Exposure Limits: www.hse.gov.uk/pubns/priced/eh40.pdf.
- ✓ Inhaling RCS can lead to:
 - Silicosis, which is a serious and irreversible lung disease that can cause permanent disablement and early death.
 - An increased risk of lung cancer in workers who have silicosis.
 - Chronic obstructive pulmonary disease (COPD), which is a group of lung diseases, including bronchitis, and emphysema, that results in severe breathlessness, prolonged coughing, chronic disability and can lead to death. The risk of COPD is increased by smoking.
- ✓ RCS dust is also abrasive and drying when in contact with skin, and can lead to contact dermatitis. Wet working can also lead to dermatitis.

Access to work area

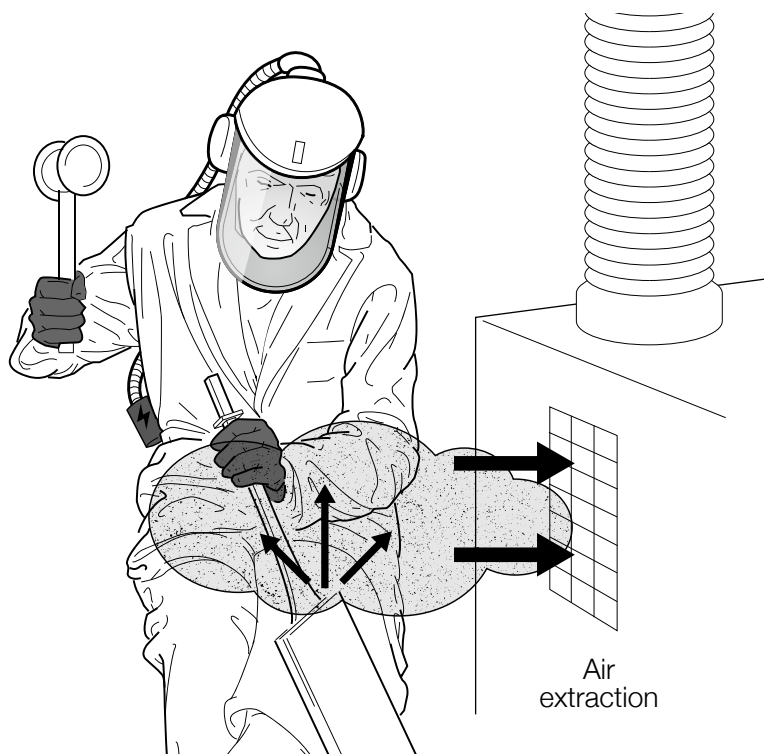
- ✓ Allow access to authorised and appropriately trained people only.
- ✓ Segregate this task as far as possible to reduce spreading of airborne contamination to other workers.

Equipment and procedures

- ✓ Reduce dust by keeping slates damp during handling and packing.
- ✓ Use Local exhaust ventilation (LEV) to adequately control stone dust.
- ✓ If using both LEV and local air displacement make sure that the local air displacement does not reduce the effectiveness of the LEV.
- ✓ Air sampling data may be obtained to confirm that the control of RCS is adequate.

Local Exhaust Ventilation (LEV)

- ✓ Use LEV to control dust generated from splitting slates.
- ✓ Position LEV hood as close as possible to the splitting point and within one hood diameter to ensure dust capture is effective.
- ✓ Check pre-filters daily, or follow manufacturer's advice.
- ✓ Have a clean supply of air coming into the work room to replace extracted air.
- ✓ Discharge extracted air to a safe place away from doors, windows and air inlets.



- ✓ Provide an easy way of checking the LEV is working, eg. airflow indicator or equivalent.
- ✓ Fit an indicator or alarm to show if filters have blocked or failed.
- ✓ Only use a recirculating LEV system if the air is thoroughly cleaned before its return to the workroom. Under these circumstances, the system should have continuous monitoring (eg. a pressure gauge) and alarms or indicators (eg. for a blocked or failed filter).
- ✓ Always confirm that the extraction is turned on and working at the start of work. Check the gauge.

Respiratory protective equipment (RPE)

- ✓ RPE is also likely to be required.
- ✓ Provide RPE with an assigned protection factor (APF) of at least 20 (see sheet R3).
- ✓ For comfort factors and compatibility with eye protection worn, a powered respirator with a hood may be selected.
- ✓ RPE may be needed for maintenance and cleaning.
- ✓ Fit testing is required for RPE with a tight-fitting face seal.
- ✓ Workers wearing tight-fitting RPE must be clean shaven and trained how to fit it properly and look after it.
- ✓ Change the filters on respirators in accordance with manufacturer's recommendations and if:
 - The shelf-life expiry date has passed
 - They are damaged or visibly contaminated
 - They become harder to breathe through
- ✓ Make suitable arrangements for maintenance, storage and replacement of RPE.
- ✓ Train workers to use RPE properly and look after it.
- ✓ Tell workers to check RPE is working properly before every use.
- ✓ Examine and test non-disposable RPE thoroughly at least once every month and record this.

Personal protective equipment (PPE)

- ✓ Ask your supplier to advise on suitable PPE.
- ✓ Provide storage for clean and contaminated PPE.
- ✓ Provide coveralls that do not retain dust – synthetic rather than cotton.
- ✓ Provide protective gloves suitable for wet working and contact with crystalline silica.
- ✓ Use a contract laundry or a suitable equivalent to wash work clothing. Don't allow workers to do this at home. Warn them that the dust contains silica.

Personal decontamination and skin care

- ✓ Provide warm water, mild skin cleansers, and soft paper or fabric towels for drying. Avoid abrasive cleansers.
- ✓ Provide pre-work skin creams, which will make it easier to wash dirt from the skin.
- ✓ Provide after-work creams to replenish skin oils.

Caution: 'Barrier creams' are not 'liquid gloves' and they do not provide a full barrier.

Maintenance, examination and testing

- ✓ Minerals and silica-containing dusts are very abrasive. Plan regular maintenance.
- ✓ Keep all equipment used for the task in effective working order. Maintain it as advised by the supplier or installer.

- ✓ Clean down the equipment before starting maintenance – use wet or dustless methods.
- ✓ For LEV, a user manual or log book is helpful in setting out the frequency of checking, maintenance or parts replacement.
- ✓ For LEV with no user manual or log book, you may need the help of a competent person. They can determine the performance needed for adequate control.
- ✓ Several measures are available to check effectiveness of controls. These range from simple qualitative (eg. use of a dust lamp) to complex quantitative techniques (eg. air sampling. See sheet G409) - usually for higher-risk scenarios.
- ✓ LEV systems require a statutory ‘thorough examination and test’ (TExT).
- ✓ Get a competent person to perform the TExT at least once every 14 months.
- ✓ Carry out all actions arising from the TExT.
- ✓ Keep an employer record for at least 5 years of TExT information such as target extraction rates which show the LEV is performing as originally intended.
- ✓ HSG258 provides more detailed information on LEV systems and legal and competence requirements.

Cleaning and housekeeping

- ✓ Clean work equipment and the work area daily. Clean other equipment and the workroom regularly - at least once a week.
- ✓ Vacuum dry dust or use wet cleaning methods.
- ✓ Use vacuum equipment that meets at least dust Class M (medium hazard) classification to remove dust.

Caution: Never allow the use of brushes or compressed air for removing dust from skin and clothing. Avoid the use of brushes or compressed air for removing dust from surfaces or from inside machinery.

Health surveillance

- ✓ Provide health surveillance for silicosis where there is a reasonable likelihood that silicosis may occur in your workplace. See sheet G404.
- ✓ Provide health monitoring for chronic obstructive pulmonary disease (COPD) where there is a reasonable likelihood that COPD may occur in your workplace. See sheet G401.
- ✓ Provide health surveillance for dermatitis where there is a reasonable likelihood that dermatitis may occur in your workplace. See sheet G403.

Training and supervision

- ✓ Tell workers about the hazards associated with their work and how to recognise early signs of lung damage from exposure to RCS.
- ✓ Provide workers with training on operating the equipment and using the control measures correctly, and to report any faults immediately.
- ✓ Provide supervision – ensure that safe work procedures are followed.
- ✓ Involve managers and supervisors in health and safety training.
- ✓ Training records are helpful to demonstrate training has taken place.

Employee checklist

- Are you sure about safe work procedures?
- Is the equipment in good condition and working properly?
- Look for signs of leaks, wear and damage before every job.
- If you find any problems, tell your supervisor. Don't just carry on working.
- Make suggestions to improve the effectiveness of control.
- Co-operate with health surveillance.
- Use, maintain and store your PPE in accordance with instructions.
- Wash hands before eating, drinking, smoking, using the lavatory and after work.

Essential information

G401 – Health monitoring for chronic obstructive pulmonary disease (COPD).

G403 – Health surveillance for occupational contact dermatitis (OCD).

G404 – Health surveillance for silicosis.

G409 – Exposure measurement: Air sampling.

R3 – Respiratory protective equipment, UK Standard Assigned Protection Factor 20 (APF 20).

Further information

You can find the full COSHH essentials series at www.hse.gov.uk/coshh/index.htm

Occupational Safety and Health Consultants Register at <http://www.oshcr.org/>

Controlling airborne contaminants at work:
A guide to local exhaust ventilation (LEV), HSG258,
<http://www.hse.gov.uk/pubns/books/hsg258.htm>

Respiratory protective equipment at work – A practical guide, HSG53,
<http://www.hse.gov.uk/pubns/books/hsg53.htm>

G-series: General Guidance COSHH Essentials sheets at
<http://www.hse.gov.uk/pubns/guidance/gseries.htm>

Information on health and safety for stone working in the stone manufacturing and construction industries can be obtained from:

The Health and Safety Executive at <http://www.hse.gov.uk/stonemasonry/index.htm>

Stone Federation at <http://www.stonefed.org.uk/>

Quarry Partnership Team (QPT) at <http://www.safequarry.com/qpt.aspx>

Construction Dust Partnership (CDP) at <http://www.citb.co.uk/health-safety-and-other-topics/health-safety/construction-dust-partnership/>

For information about health and safety visit <https://books.hse.gov.uk> or <http://www.hse.gov.uk>

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