

Welcome to the Summer edition of the Health and Safety newsletter. In this edition we have an article on the amendment to the Noise at Work Regulations. There is also advice on working in the sun, leptospirosis, hepatitis and working with migrant workers. Furthermore, we have detailed some exciting new services that mhl are pleased to be able to offer our clients. Please contact us on 08453 100600 or email [healthandsafety@mhl-support.com](mailto:healthandsafety@mhl-support.com) if you require additional information.

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## "Can't Stop the Music" - We'll see about that!

Noise at work can cause hearing loss which can be temporary or permanent. Hearing loss is not the only problem. People may develop tinnitus (ringing, whistling, buzzing or humming in the ears), a distressing condition which can lead to disturbed sleep.

The Control of Noise at Work Regulations 2005 came into force in Great Britain on 6 April 2006 and a revision of the regulations came into force on 6th April 2008 which affects the music and entertainments sector. The revisions that have been made, may well test the great words of the Village Peoples' "Can't stop the music". You may ask does this mean we are going to see rock stars such as Nickelback, Metalic or Guns and Roses up on stage wearing ear muffs?

Well as a matter of fact many professional artists are already utilising

hearing protection; in fact most of the band members of Metalica wear ear plugs.

The April 2008 revision covers workplaces where live music is being played. It also includes the playing of recorded music in a restaurant, pub, discotheque, nightclub, or alongside live music, dramatic or dance performance. It is the responsibility of the employer in such an establishment to control the noise exposure of their employees. When managing noise exposure of employees in the music or entertainment sector it should be noted that the noise varies



markedly during day to day operations. With this in mind the regulations allow weekly personal noise exposure (weekly average) to be considered in place of daily personal noise exposure (8 hour average) to assist employers with compliance to the legislation.

Each employer is required to undertake a risk assessment taking into account the exposure to noise at Work.

The level of risk will depend on how loud the noise is and how long people are exposed to it.

As a simple guide you will probably need to do something about the noise if any of the following apply:

- Is the noise intrusive - like a busy street, a vacuum cleaner or a crowded restaurant - for most of the working day?
- Do your employees have to raise their voices to carry out a normal conversation when about 2 m apart?
- Are your employees exposed to noisy powered tools or machinery (or loud music levels) for more than half an hour each day?
- Do you work in a noisy industry, e.g. construction, demolition or road repair, woodworking, plastics processing, engineering, textile manufacture general fabrication, forging, pressing?
- Are there noises due to impacts (such

as hammering, drop forging, pneumatic impact tools etc), explosive sources such as cartridge-operated tools or detonators, or guns?

If any of the above apply, you will need to ensure that a Noise Assessment is carried out by a competent person. The assessment should identify the steps required to reduce the risks to an acceptable level. The most effective strategy to counter the problem is to reduce noise at source by using engineering controls such as directional speakers, acoustic barriers and so on. If, for technical or economic reasons, engineering control is not feasible, then other controls should be used such as reducing exposure to noise by job rotation and the provision of hearing protection.

It is essential that workers be suitably trained in the hazards of noise and the importance of using any prescribed personal protective equipment. Workers must always report any defects in equipment to the employer and the employer must regularly ensure that personal protective equipment is maintained so that it is always in good working order. Finally, you must provide health surveillance (hearing checks) for all your employees who are likely to be regularly exposed above the upper exposure action values, or are at risk for any reason, e.g. they already suffer from hearing loss or are particularly sensitive to damage.



## Working in the sun.

If by some accident, we do end up having some good weather this summer there are considerations that employers should take for staff who work in the sun.

The sun has a positive effect on all of us, it makes most of us feel happy and as a consequence, our approach to our everyday activities including work is usually much more positive.

As an employer, the benefits of the sun can also be positive as it is generally acknowledged that a happy worker is a more productive worker! However, employers often do not consider the down side of working during the summer months and productivity in the workplace can be affected due to it being unbearably hot and therefore employees need to take more breaks or just simply work slower.

A wise employer will plan for the sun by implementing 'summer working' or an adjusted work regime for the summer months.

This may typically include extra breaks for employees when the temperature exceeds a given level, allowing employees easy access to cold drinks and refreshments (even ice cream!), and providing fans or other cooling devices to ensure employees remain at their productive best. Employees working outside in direct sunlight are often overlooked and it is worth remembering that there is a very real danger that employees exposed to too much direct sunlight can be harmed as a result. i.e. sunstroke, severe sunburn, exhaustion etc.

Whilst there is no specific legislation relating to working in the sun, there is however a general obligation for employers to ensure that their employees remain safe whilst at work.

### **Risk Assessment**

Working in the sun should be considered as part of the risk assessments required under The Management of Health and Safety at Work Regulations 1999.

## Ways we can reduce the risk

- Include sun protection advice in routine Health and Safety training or meetings.
- Advise staff to keep covered up during the summer months - especially at lunch time when the sun is at its hottest and take breaks in the shade.
- Encourage staff to use sunscreen of at least SPF (Sun Protection Factor) 15 on exposed parts of the body.
- Consider scheduling work to minimise exposure.
- Locate water points and rest areas in the shade and advise staff to drink plenty of water.
- Keep your workers informed about the dangers of sun exposure, encourage workers to check their skin regularly for unusual spots or moles that change size, shape or colour and to seek medical advice promptly if they find anything that causes them concern.
- Take the views of your employees into account when introducing any new sun safety initiatives.

Benefits for your company and employees from managing their sun exposure risk can be:

- Fewer absence days through sunburn.
- Healthier and better-informed work-

force.

- Reduced risk to employees of skin cancer from long-term sun exposure.



## Leptospirosis (often known as Weil's disease)

### What is Leptospirosis?

Leptospirosis is a serious disease caused by pathogenic strains of the *Leptospira* spirochetes, which affects almost all mammals. Leptospirosis is rare in the UK (c. 10 cases per year). There are two types of leptospirosis:

(1) Weil's disease is a serious and sometimes fatal infection that is transmitted to humans by contact with urine from infected rats.

(2) Hardjo is transmitted from cattle to humans.

Both diseases start with a flu-like illness with persistent and severe headache, which can lead to vomiting and muscle pains and ultimately to jaundice, meningitis and kidney failure. In rare cases the diseases can be fatal. Infection occurs when the bacteria penetrate through open or moist skin (eg nose or mouth) but the disease is not spread from person to person. Leptospirosis starts about 10 days after infection. Many cases settle down after a week or two, but some people are seriously affected. Weil's Disease is a very serious illness, and must be swiftly diagnosed and treated.

### **Who's at risk?**

Anyone who is exposed to rats, rat or cattle urine or to fetal fluids from cattle is at risk. It's predominantly an occupational disease. For example: farmers, vets, gamekeepers, sewer and abattoir workers. Workers in contact with canal and river water are also at risk. It is also possible among water-sport enthusiasts.

### **Prevention**

Preventative measures include; eliminating rats, vaccinating cattle, washing and covering broken skin with waterproof plasters, wearing protective clothing and washing hands before eating and drinking. Report any illness to your doctor. If you are an employer, make sure that staff understand the importance of taking all precautions and check that they do - this could include

showing your employees the leaflet: Leptospirosis INDG 84 - Leptospirosis Are You at Risk (free to download from the HSE website).

## **Immunisation against Hepatitis**

### **What is Hepatitis?**

In simple terms Hepatitis means injury to the liver and is characterized by the presence of inflammatory cells in the liver tissue.

The condition can be self limiting, healing on its own, or can progress to scarring of the liver. The patient becomes unwell and symptomatic when the disease impairs liver functions.

### **Types of Hepatitis.**

Most cases of acute Hepatitis are due to viral infections.

#### **Hepatitis A.**

Hepatitis A or infectious jaundice is caused by a virus transmitted by the faecal-oral route, often associated with anal/oral sex, personal contact, ingestion of contaminated food or water. A vaccine is available that will prevent infection from Hepatitis A for life.

#### **Hepatitis B.**

Hepatitis B, caused by a virus known as HBV, is the most infectious blood borne pathogen known. It is transmitted in blood, blood products or in other body fluids. Blood contact can occur by

sharing syringes in intravenous drug use, shaving accessories such as razor blades, or touching wounds on infected persons. A vaccine is available that will prevent infection from Hepatitis B for life.

### **Hepatitis C.**

Hepatitis C can be transmitted through contact with blood. It may lead to a chronic form of Hepatitis, culminating in cirrhosis of the liver.

### **Hepatitis D.**

Hepatitis D is caused by Hepatitis delta agent, and it can only propagate in the presence of the Hepatitis B virus.

### **Hepatitis E.**

Hepatitis E produces symptoms similar to Hepatitis A it is more prevalent in the Indian subcontinent.

Types of work where Employees may be exposed to Hepatitis:

- custodial services (prisons/detention centres/homes)
- education
- embalming and crematorium work
- emergency services (ambulance/fire/police/rescue)
- first aid
- hairdressing and beauticians' work
- health care (hospitals, clinics, dental surgeries, pathology departments, community nursing, acupuncture, chiropody, associated cleaning services) laboratory work (forensic, research etc) local authority services

(street cleaning/park maintenance/refuse)

- lavatory maintenance
- medical/dental equipment repair
- military
- mortuary work
- needle exchange services
- plumbing
- sewage processing
- social services
- tattooing, ear and body piercing

### **Safe working practices and immunisation.**

Although there are other routes of infection (see Hepatitis A), as with all infection risks, the most effective method for prevention is the adoption of safe working practices to safeguard from known sources, such as blood and bodily fluids. Immunisation should never be regarded as a substitute for good practice. Immunisation (vaccination) is available against Hepatitis. The need for a worker to be immunised should be determined by the risk assessment. It should only be seen as a supplement to reinforce other control measures. As an employer, you should make vaccines available free of charge to employees, if they are needed. It is recommended that a vaccination record is kept.

Employers should consult their own GPs, health centres or occupational health service provider for specific advice relating to their sphere of operations and the suitable vaccine requirements.

## Migrant Workers

A recent survey by the Health and Safety Executive, in which 200 migrant workers took part, revealed that migrant workers are more likely to be working in sectors where there is already Health and Safety issues and it is their status as new workers that may put them at increased risk.

### **So what do employers need to take into account?**

- Migrant workers are entitled to the same protection under Health and Safety law as other workers.
- They must be informed who they are employed by; this is particularly important when they are supplied by a labour provider.
- They must be given adequate Health and Safety information, instruction, training and supervision in a form they can understand.
- Migrant workers motivation for working in the UK is often to earn as much money as possible in the shortest time possible, which could add to the risk factor.

### **So what are the problems?**

- Migrant workers may have little knowledge of health law and may have had a different experience and perception of Health and Safety in their own country.

- They may not be able to communicate effectively with other workers, managers and supervisors.
- They may not fully understand the risks associated with the task or process with which they are involved.

### **What do employers need to do?**

- Consider what, if any, skills are required and ensure migrant workers have those skills.
- Decide how much information, instruction and training is required and how you are going to communicate that information to them.
- Provide Health and Safety information and signage where possible in their own language. (see HSE Website for assistance)
- Where workers are supplied by a labour provider, ask them to also provide a supervisor who is fluent in both English and their own language and agree with them who are providing the PPE.

**Remember the responsibility for their Health and Safety is that of their employer.**

## New Safety Services

At mhl we are constantly striving to improve the services that we can offer to our clients. We are pleased to announce that we can now offer the following additional services:

- Environmental Management systems
- Fire risk assessments
- Construction CDM advice and CDM co-ordinator services
- Training
  - Manual Handling training
  - Safety awareness
  - Risk Assessment training
  - COSHH Awareness
  - Fire awareness and fire marshall training
  - Work at height training
  - Construction Health and Safety awareness

.....and more to come

- Noise surveys
- Dust surveys
- Compliance officer program - complete assistance with the completion of your Health and Safety management system.

## Hot Support Line Question

**Here is an example of a common question to our 24 hour support line - to contact the support line call 08453 100999**

**Client Query - What is the maximum temperature in the workplace?**

'The temperature in workrooms should provide reasonable comfort without the need for special clothing. Where such a temperature is impractical because of hot or cold processes, all reasonable steps should be taken to achieve a temperature which is as close as possible to comfortable. 'Workroom' means a room where people normally work for more than short periods.

The temperature in workrooms should normally be at least 16 degrees Celsius unless much of the work involves severe physical effort in which case the temperature should be at least 13 degrees Celsius. These temperatures may not, however, ensure reasonable comfort, depending on other factors such as air movement and relative humidity.

Please speak with your health and safety consultant about these services or contact us on [healthandsafety@mhlsupport.com](mailto:healthandsafety@mhlsupport.com)