

# Reducing Occupational Disease Through Effective Exposure Control

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# Tenets of Occupational Hygiene

- Recognition
- Evaluation
- Control

*Whilst recognition and evaluation are important, it is only when the right controls are in place, used and effective that health is protected*

# Statistics

Deaths from Occupational Respiratory Disease in UK:

**12,000 per year**

Deaths from 'Accidents' at Work in UK:

**133 per year**

*Source: BOHS factsheet*

# Control

‘.....the major determinant of risk for the development of occupational asthma is the level of exposure ... ..reducing exposure reduces the number of workers who develop disease’.

*Ref : ‘ Evidence based guidelines for the prevention, identification, and management of occupational asthma P J Nicholson et al Occupational and Environmental Medicine 2005;62:290-299*

**Effective control is key to reducing the toll of occupational death and disease**

# Nickel Platemaking – 1

**Poor control**

**Excessive urine levels**

**Significant airborne exposure: Ave nickel levels 57 µg/m<sup>3</sup>**

Recommendations included:

Control at source

- Minimise generation of mist

  - Change agitation method

  - Better temperature control

  - Improve seals / covers on tanks

  - Deploy LEV at tanks

Improved room ventilation to supplement the above

PPE

# Nickel Platemaking – 1

## Action

2007 – 2008

- Better temperature control
- Improved seals / covers on tanks
- Improvements to room ventilation
- PPE / Personal Hygiene
- Training
- No LEV as recommended.

2008 – 2009

- Enclosure + LEV

Ave Nickel Levels ( $\mu\text{g}/\text{m}^3$ ) (WEL = 100)					
Personal			Statics		
2007	2008	2009	2007	2008	2009
56	29	<1	73	46	<1

# Nickel Platemaking 2

## Excellent mist control !

- Nickel levels have been 1  $\mu\text{g}/\text{m}^3$  or less constantly over last 5 years (OEL = 100)
- Why?
- Well designed LEV
- Competent factory engineer

# Flour Dust

[loading a mixer]

Inhalable Dust Levels (mg/m <sup>3</sup> )		
Before	Partial fix	Full fix
11.9 – 53.1	3.2 – 16.1	2.0 – 3.7
Ave 26.8	Ave 7.2	Ave 2.9



# Flour Dust

		Inhalable Dust Exposure
Original	Poor Control	6.2
New LEV	Poor Design	3.1

# Flour Dust

- LEV applied to mixer hopper
- Insufficient suction
- Does not into account of bag disposal
- Inhalable dust levels:  
 $3.7 - 48 \text{ mg/m}^3$

# Rubber Fume

**HSE improvement notice.**

**Some fume levels above OEL**

Fumes from

- Press
- Transfer of parts from press to fettling table (LEV applied but poor)
- Post fettling

*Advised that best solution would be LEV plus change in work layout so that all major sources of fume exposure were controlled.*

# Rubber Fume

Outcome: ....company decide to purchase fume cupboards !

- Modest control at fettling
- No control at other sources
- Cut slot at sides of FC ...fume escapes

Modest improvement only

Still significant exposure

Cost: 2 x cost of proper LEV

£45k cf £22K)

**Why ??**

# Enzymes (food industry)

**High dust levels**

**5 cases of asthma**

- Clearly a dust problem
- Engineering director: *'we have LEV – what more can we do'*

# Artificial Eye Manufacture (methyl methacrylate)

- Moderately high MM levels (~ 10 – 125 ppm)
- Proposed solutions by ‘ventilation engineers’
  - Not effective
  - Impossible to use
- Final AJW/FSG solution: Reduction in levels to <1 – 2 ppm

# Key Factors

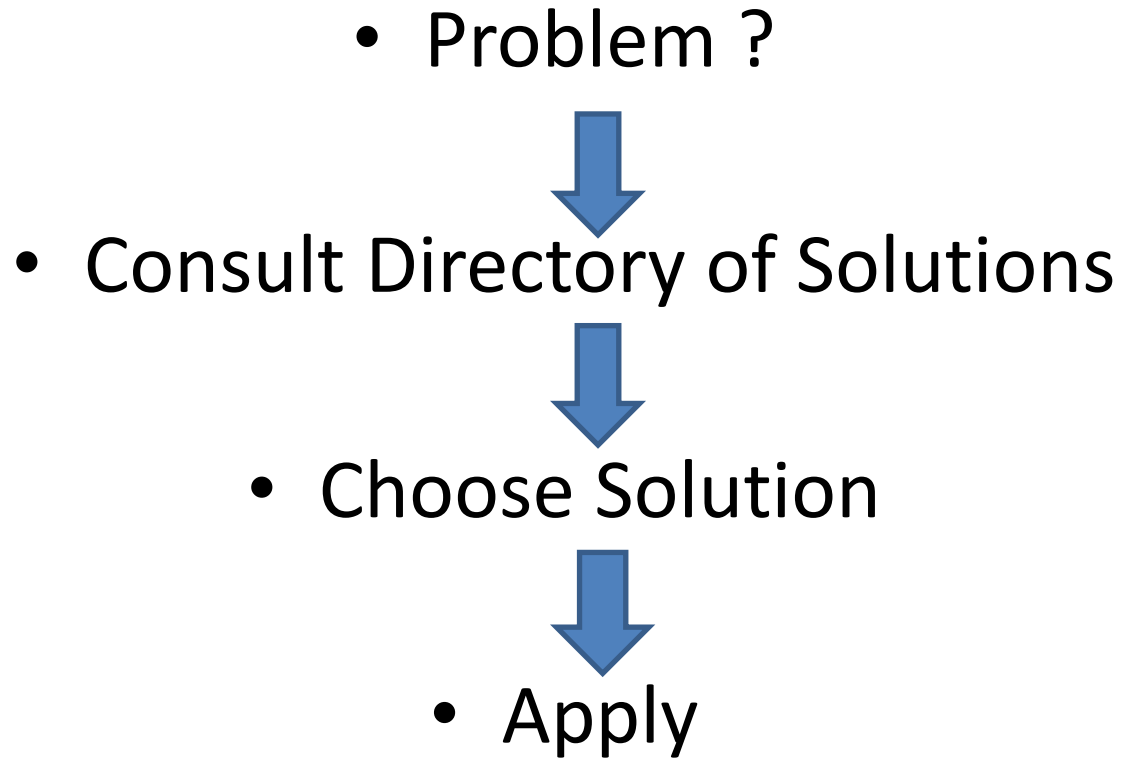
## ART:

- Technology
- Procedures
- Worker Behaviour

## BOHS conference (2014):

- Organisational
  - Technical
  - Financial
  - People

# Ideal





**Reality ??**

# Control Strategy

- Understanding the problem
- Identifying key aspects
- Deciding level of control
- Consider control options
- Selection of most appropriate option
- Commissioning of control
- Management

# Guidance

- **BOHS / ACGIH .....**
- **Published literature**
- **HSE**
  - CoSHH Essentials
  - HSG 258
  - CE control sheets
- **Occupational Hygienists**
- **Industry Guidance**
- **Data Bases (ECEL, CEFIC)**

# Control Efficiency

- Efficiency ? Effectiveness? Efficacy ?
- Misleading terminology?
- Bottom line is that effective means
  - protecting health
  - complying with the law

# Defining Effectiveness:

**Reduction factor:**  $\frac{\text{Exposure before control}}{\text{Exposure after control}}$

- **RMM effectiveness:** % reduction in exposure concentration...produced by application of the risk management measure (*ECHA*)
  - **RMM efficacy value** (*ECEL database*)
  - **Modifying Factor (MF) score** (*ART*)
    - **Exposure reduction** (*HSE*)

*Scope for confusion ?*

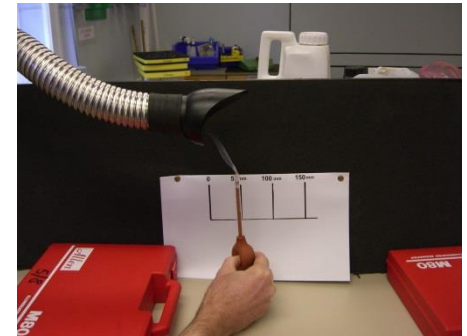
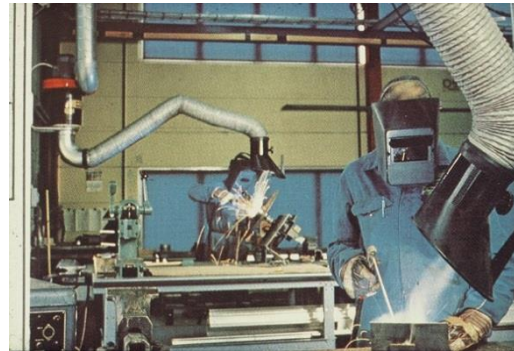
# Efficiency of a Movable Capture Hood

20 % ?

50 % ?

90 % ?

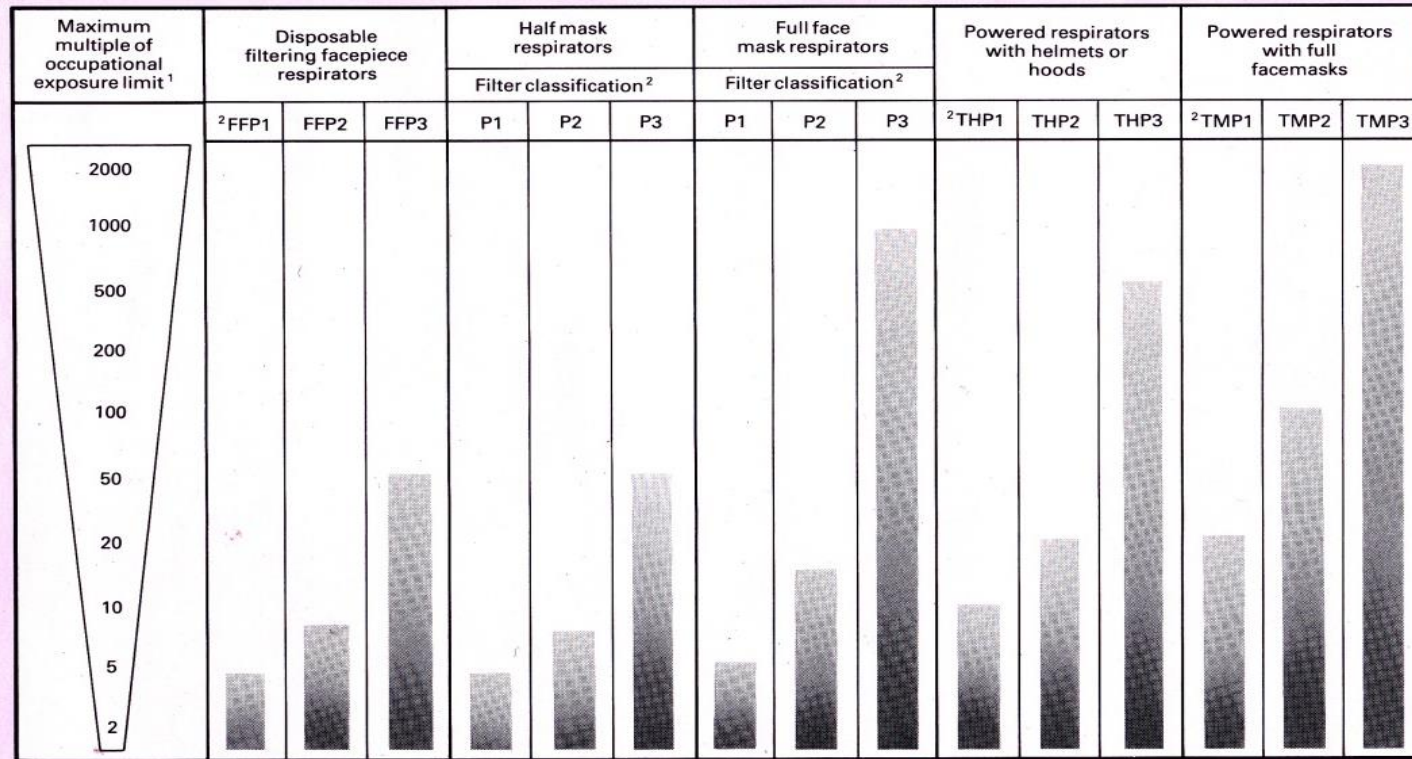
95 % ?



# Analogies with PPE?

- RPE
  - NPFs
  - APFs
- Noise
  - APF
  - Fiddle factor

# Development of NPFs in respiratory protection



Notes: <sup>1</sup> See paragraphs 14 and 23-32  
<sup>2</sup> Classifications in European (CEN) standards

Figure 4 Selection chart: Respirators for dusts and other particles



# Reducing Occupational Disease Through Effective Exposure Control

- Micro control
  - individual control measures
- Macro control
  - An holistic approach
  - e.g. BOHS 'Breathe Freely' Campaign to protect health of construction workers

# Reducing Occupational Disease Through Effective Exposure Control

- A long way to go
- Many influencing factors
- Need for understanding of such factors and how they interrelate
- Lack of agreement of effectiveness of individual control measures
- Only from better knowledge of the application of effective controls will the toll on worker health and deaths decrease

# Reducing Occupational Disease Through Effective Exposure Control

*Thank You for Listening !!*

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