



# **COSHH** essentials: General guidance



This information will help employers (including the self-employed) comply with the Control of Substances Hazardous to

Health Regulations 2002 (COSHH), as amended, to control exposure and protect workers' health.

It is also useful for trade union safety representatives.

The sheet describes specialist advice on health health surveillance for occupational asthma.

It sets out what you should expect from a health surveillance provider.

Tell your occupational health professional, or if appropriate, your designated responsible person if workers have any of the following symptoms:

- recurring sore or watering eyes;
- recurring blocked or running nose;
- bouts of coughing;
- chest tightness;
- wheezing; or
- any persistent history of chest problems.

Do the symptoms improve at weekends or during holidays?

If workers smoke, help them to cut down or stop.

Note: irritating substances may make existing asthma worse.

# Health surveillance for occupational asthma

# **Control approach 4 Special**

## Introduction

- ✓ Your work involves a substance that can cause occupational asthma. Occupational asthma is a major occupational health problem.
- If you detect an employee's symptoms early enough and reduce their exposure, you will reduce their risk of developing full-blown asthma.

## Main causes

Isocyanates (eg two-pack spray paints), flour dust, grain dust, glutaraldehyde, wood dust, latex (powdered natural rubber latex gloves), rosin-cored solder fume, laboratory animals or glues and resins can all cause occupational asthma.

#### Occupations

Bakeries and food processors, beauty services, cleaning services, healthcare services, painters, repairers (including electronics), welders and woodworkers (including forestry) are all associated with occupational asthma.

## **Planning and preparation**

Plan what you are going to do if a worker shows signs of lung problems and make sure your employees are aware of your plans

## What is health surveillance?

- Health surveillance is collecting and using information about workers' health, related to the substances they use. It helps prevent asthma developing by detecting the early signs.
- ✓ Consider using higher-level health surveillance first.
- ✓ Health surveillance is **never** an alternative to the proper control of exposure. It is not the same as health screening or health promotion.

## Higher-level health surveillance?

- ✓ Higher-level health surveillance is required for any or your workers who:
- are exposed to substances in the main causes (above), or substances and processes where occupational asthma is a known problem;
- are working with products labelled R42 'May cause sensitisation by inhalation' (may lead to asthma), or R42/43 'May cause sensitisation by inhalation and skin contact'; or
- have a confirmed case of asthma.

- If the risk of exposure is low in your particular circumstances you may decide, in consultation with your occupational health professional, to move to lower-level health surveillance.
- Involve a health professional (doctor or nurse) in your health surveillance programme, they will help develop your scheme - see 'Useful links'.
- ✓ Higher-level health surveillance could include the following measures:
- Assess workers' respiratory health before they start a relevant job to provide a baseline (perhaps using a questionaire and lung function assessment).
- Introduce regular testing yearly, or as advised by the health professional. This could involve further questionnaires and lung function assessments. The health professional must explain the test results to the individual and report to you on the worker's fitness to work.
- Health surveillance providers should be suitably qualified, eg with an Association for Respiratory Technology and Physiology (ARTP) diploma. This means that their tests will be 'right' - see 'Useful links'.
- Your health provider should interpret the results and identify any need to revise the risk assessment.
- You should appoint a responsible person, supported by the health professional, to report any symptoms that occur between tests.
- Keep a health record, and encourage workers to keep a copy of their results in case they change jobs.
- Keep simple attendance records to identify any patterns in sick absence.

#### Lower-level health surveillance?

- ✓ Lower-level health surveillance is required where:
- there is only occasional or potential exposure to a respiratory sensitiser;
- control is adequate; or
- you decide to move to lower-level surveillance in consultation with your health professional.
- Involve a health professional (doctor or nurse) in your health surveillance programme, they will help develop your scheme and train a responsible person - see 'Useful links'.
- Lower-level health surveillance could include:
- an annual questionnaire, done by the responsible, trained person; and
- keeping a health record.
- If you have a confirmed case of asthma, you should use higher-level health surveillance.

#### What is it likely to cost?

 Higher-level health surveillance at your workplace costs an estimated £50 per person per test. Lower-level health surveillance costs less than half of this.

Record keeping

- ✓ Record:
- the activity that can cause asthma;
- worker's name, address and National Insurance number;
- products or process they work on, and how often;
- protective measures provided;
- date of starting work with the product or process; and
- the fitness for work statement.

#### **Useful links**

- For information about health and safety, or to report inconsistencies or inaccuracies in this guidance, visit www.hse.gov.uk/. You can view HSE guidance online and order priced publications from the website. HSE priced publications are also available from bookshops.
- For a list of asthmagens log onto www.hse.gov.uk/asthma.
- Look in the Yellow Pages under 'Health and safety consultants' and 'Health authorities and services' for 'occupational health'.
- Also see www.nhsplus.nhs.uk.

This document is available at: www.hse.gov.uk/pubns/guidance/ and www.hse.gov.uk/coshh/essentials/

This document contains notes on good practice which are not compulsory but which you may find helpful in considering what you need to do.

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