

# **Minutes of Safety Group Fife Meeting**

**Held 8<sup>th</sup> March 2010 at**

**Dunfermline Building Society, Caledonia House  
Carnegie Avenue, Dunfermline.**

## **Present**

David Cant	Carnegie College
Peter Ager	Fife Council
Richard Wilson	Queen Margaret University
Andy Martin	Fife H&S Consultants
Andy Hill	Fife Council
John Johnston	FMC Technologies
Jane McDonald	Individual Member
Colin Sparling	Carnegie College
Linda Bell	Business Medical

The meeting started interestingly as, when the members arrived, the Building Society premises were in darkness due to a fault in an underground cable and the company generators had failed to “kick in”. As no time scale for re supplying the power could be given by Scottish Power it was decided to cancel the meeting and a few of the members left. Eventually the power was restored and the members who had stood around talking decided to carry on with the meeting.

## **Chairman’s opening remarks.**

D.C. apologised for the inconvenience to the start of the meeting and the fact that the meeting had been cancelled then reconvened after several members had left. A new member Andy Hill from Fife Council was welcomed to the group. Linda Bell was then invited to deliver her presentation.

## **Presentation**

Linda opened by comparing Health Surveillance and Fitness for Work.

Fitness for work checks health before work to see if health could affect work.  
Health Surveillance checks health after work is done to see if work affects health.

## **Fitness for Safety Critical Working**

Includes such tasks as:

- Working at Height
- Working in Confined Spaces
- Wearing Breathing Apparatus
- Working with Compressed Air
- Diving

Driving  
Food-handling  
Healthcare  
Emergency Response  
Rail, Air or Sea Transport  
ETC.

### **Working at Height**

Blackouts	-	Epilepsy, diabetes, heart
Sudden acute pain	-	Angina, bowel conditions
Poor balance	-	Ear conditions
Weakness or poor Co-ordination	-	Multiple sclerosis
Poor vision or hearing	-	No glasses, cataracts
Awareness, concentration	-	Depression, medication
Alcohol or drugs	-	<i>Mondays, end of month</i>

### **Medical assessments**

Health questionnaires  
Height, weight Body Mass Index  
Blood pressure  
Urine sugar  
Vision

Alcohol and Drugs – pre employment, random with cause

### **Other Safety Critical Jobs**

Offshore work  
Breathing Apparatus  
Emergency Response  
Driving  
    LGV/PSV  
    Forklift truck  
    Road Risk – professional driver

### **What is Health Surveillance?**

“about systematically watching out for early signs of work related ill health in employees and acting on the results”

### **Relevant Legislation**

The Health and Safety at Work Act (section 2(3))  
COSHH  
Control of Noise at Work

Control of Vibration at Work  
Management of Health and Safety at Work

### **Appointed Doctor Medicals in Legislation**

Control of Asbestos  
Control of Lead  
Ionising Radiation  
Diving Operations  
Work in Compressed Air

### **Employer Responsibility**

Management of Health and Safety at Work Regs

*“Every employer shall ensure employees are provided with such Health Surveillance as appropriate having regards to the risks to their health and safety which are identified by the risk assessment.”*

### **HSE**

The HSE will assess the adequacy of health surveillance by looking for:

- Surveillance justified in cosh assessment
- Written procedures available
- Competent people undertaking assessments
- Health records available
- Evidence of action on adverse results.

### **How is it done**

- Inspections
- Enquiries about symptoms
- Medical Surveillance
- Biological effect monitoring
- Biological monitoring
  
- Keeping records
  
- Anonymised analysis of results

### **Who does it**

*“A competent person acting within the limits of their training and experience”*

## **How Often**

Noise	Pre-employment Annually for 2 years Then 3 yearly or more frequently if high risks
Vibration	Pre-employment Annually or more frequent where abnormality detected
COSHH	Pre-employment Annually or more frequently if high risk

## **How long do you keep records**

- As long as they are under health surveillance
- Noise and vibration – no specific guidance
- COSHH, Lead. Asbestos, Ionising Radiation – 40 to 50 years
- Good practice to give employees a copy if they leave your employment
- Employers who cease trading are obliged to offer the HSE a copy for safe keeping and the employee a copy.

On completion Linda answered a few questions the assembled members asked then the chairman thanked her for a very informative and though provoking talk. Linda's presentation will be available on the web pages shortly.

## **AOB**

### **Finances**

Colin highlighted the bank had refunded the £20.00 charges they had made previously admitting the fault was theirs.

### **Web site**

John said the web site was ticking along nicely with no problems. He however asked if he could mention his own site ([healthandsafetyforbeginners.co.uk](http://healthandsafetyforbeginners.co.uk)) saying they were running another prizedraw competition. In 2008 they gave away £7,000 in prizes, in 2009 £9,000 and are looking at £13,000 to £14,000 this year. If any member companies would like to donate a prize for this years event (Heath and Safety book, training course etc) it would be gratefully received.

### **Charity run**

John Johnston informed the member Alan Harwood, past chairman of the group, was running in the London marathon in aid of funds for CHAS. To help raise the funds for this worthwhile charity, Alan is asking for sponsorship from local companies in return for advertising logo on his running vest. The assembled members though that it would be a good cause for the group to be involved with and gain added publicity. Colin Sparling to liaise with Alan.

With no further business D.C. closed the meeting and reminded the members the date of the next meeting – 13<sup>th</sup> April when the speaker will be Louise Gillen, Scafftag Safety Systems.