

Quarries National Joint Advisory Committee (QNJAC)

Occupational Health

Information Sheet 6

June 2011

Dermatitis



Occupational Health Information Sheet No 6: Dermatitis

Legal Requirements:

The Control of Substances Hazardous to Health Regulations 2002 (as amended) to control exposure to chemicals and protect workers health.

Following a risk assessment to identify what exposures are and who is likely to be exposed then conditions should be put in place to prevent exposure where possible. Where exposure cannot be prevented controls should be put in place so that exposure is adequately controlled.

Where exposure occurs and there is the potential for harm if controls fail the Regulations require health surveillance for specific substances/processes (Schedule 6 to the Regulations) or where a worker is exposed to a hazardous substance so that:

- an identifiable disease/adverse effect may be related to exposure
- there is a reasonable likelihood the disease/effect may occur
- there are valid techniques for detecting the disease/effect
- the technique is a low risk to the worker

Workers exposed to substances which can cause dermatitis are likely to require health surveillance (skin checks).

The results of health surveillance should be used to provide feedback on the effectiveness of your control measures and to identify particularly vulnerable or sensitive individuals or groups of workers.

Certain types of occupational dermatitis are reportable under RIDDOR 1995 (see Schedule 3 to the Regulations)

The COSHH ACOP can be downloaded from the following link: http://www.hse.gov.uk/pubns/priced/l5.pdf

Why should you read this guidance:

In 2008/09, an estimated 20,000 individuals at work in the last 12 months suffered skin problems which they believed to be work-related.

Contact dermatitis is inflammation of the skin caused by contact with a range of

materials. These include detergents, toiletries, chemicals and even some natural products like food and water. It can affect all parts of the body but is most commonly seen on the hands.

There are two main types of contact dermatitis:

- irritant contact dermatitis results from direct damage to the skin, including from drying out
- allergic contact dermatitis is an allergic reaction to something that comes in to contact with the skin resulting in inflammatory changes that may also be away from the site of initial contact

Skin can crack, bleed, be very painful and the dermatitis can spread all over the body (see http://www.hse.gov.uk/skin/index.htm for a list of possible effects).

The effects of dermatitis, if ignored, can become permanent and can significantly affect the quality of life including a person's ability to work if it affects the hands.

If identified early enough and adequate precautions are taken most people will make a full recovery. However, if it is an allergic reaction, the person will be allergic for life to that substance, including any vapours/fumes from the substance and may therefore not be able to work in an environment where the substance is used.

Dermatitis can be avoided by ensuring that the skin does not come in to contact with materials that are known to be skin irritants or sensitisers. This requires identifying the hazards and assessing the risks from using a material, chemical or substance. Such contact can be prevented by:

- Substituting a more hazardous substance with a safer alternative
- Automating the process
- Enclosing the process as much as possible
- Using equipment for handling
- Not using hands as 'tools'
- Using a safe working distance
- Information, instruction & training

If these are not possible, the skin may have to be protected with the correct use of Personal Protective Equipment (PPE).

The HSE Web site provides guidance on the selection of gloves: http://www.hse.gov.uk/pubns/guidance/s101.pdf

Where PPE is used, regular skin checks will be required by a competent responsible person to detect any signs of contact dermatitis.

Training and instruction should be provided to the workforce on the control

measures to be used and how they can look after their skin.

- > AVOID contact
- > **PROTECT** from contact
- > CHECK after contact

Paybacks/Benefits to the business:

- A safe and healthy working environment.
- Healthy, well motivated workforce
- Reduction in sickness and long term absenteeism
- Retention of personnel.
- No personal illness injury claims.

What guidance is currently available:

- INDG233(rev1) Preventing contact dermatitis at work
- HSG262 Managing skin exposure risks at work
- COSHH essential, easy steps to control chemicals HSG193
- Posters are available to download from the HSE Webb site http://www.hse.gov.uk/skin/publications.htm
- Supplementary Advice P45 Health surveillance for occupational dermatitis, HSE Web site.
- Prevent work related dermatitis http://www.bsif.co.uk/downloads/1pSkinLeaflet.pdf
- Skin at work preventing skin disease, legislation and other control information: www.hse.gov.uk/skin

Useful contacts:

HSE Web site; http://www.hse.gov.uk/

Contact details for HSE books: 01787 881165 Safe Quarry Web site http://www.safequarry.com MPA Web site http://www.mineralproducts.org

Good practice currently available:

- Advice should be sought from a competent occupational health provider regarding the requirements for health surveillance.
- Eliminate, or if not possible, substitute hazardous materials with safer ones
- Mechanise the process to avoid contact.
- Good hygiene facilities provided including showers, wash basins, hot and cold water.
- Provision and training of competent responsible persons for skin checks
- Provision of work wear and laundry service
- The provision and encouraging the use of a hand cleaning system in dispensers including:

- Pre-work cream
- Hand cleaner
- After work cream

Training/Toolbox talks:

- Instruction provided to employees for substances they work with and the control measures provided.
- Provision, use and storage of protective clothing so they do not get contaminated.
- Different types of protective clothing required to protect against different substances and that is appropriate for the job
- The cleaning and replacement of protective clothing.
- Washing facilities.
- The use of hand creams before during and after work

Key Performance indicators to consider:

- Do your COSHH assessments specifically address dermatitis hazards and risks?
- Are suitable controls in place to eliminate, reduce and manage exposure?
- Are there robust procedures in place to undertake skin checks?
- Percentage of the "at risk" population who have received training and information in the control and prevention (Avoid, Protect, Check) of contact dermatitis.

This information sheet has been produced by the QNJAC Target Zero Occupational Health Working Group in conjunction with the MPA Occupational Health Working Group.

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