

GUIDANCE NOTE FOR SKIN SAFETY

Aim

This Guidance Note extends and supplements the information given in the University's Control of Substances Hazardous to Health (COSHH) Procedure. The Guidance Note explains the hazards to skin that may arise out of exposure to chemicals and substances and emphasises the need for all managers, staff and students to co-operate with the University in managing this area of risk through Occupational Skin Disease prevention and monitoring by:

- risk assessment,
- control measures to reduce exposure, and
- health surveillance to monitor the efficacy of those control measures.

The Guidance Note gives links to other authoritative information sources, such as the Health and Safety Executive (HSE) Website. It should be read in conjunction with the University's COSHH Procedure when completing a risk assessment for any substance that may pose a risk to skin health.

What are work-related skin diseases?

Work-related skin problems are very common. They can happen in most workplaces although they happen more in certain high-risk jobs; engineering and chemical industries for example. They can be very costly, not just through the suffering individual's experience (which can lead to ending their careers), but also because they can be a burden for employers who are left with sickness absence, recruitment, training and compensation expenses.

What are work-related skin problems?

Work-related skin problems are caused or made worse by exposure to or coming into contact with substances and chemicals, and also through having wet hands for long periods, while at work. Dermatitis (also known as eczema) is by far the most common, but other, more serious conditions also may cause problems, as can overexposure to the sun.

What should I do about it?

The good news is that although these problems are common they are preventable. There are simple, cost-effective steps that managers, staff and students can take to avoid skin problems at work, and to manage them if they do happen, using the **A**void, **P**rotect and **C**heck approach (see below).

I don't work in one of these areas. Should it still concern me?

You could potentially still have a problem.

Some products contain substances that can harm the skin or enter the body through skin contact. The product label or Safety Data Sheet (SDS) should tell you if this is the case. Look for the risk and safety phrases, and hazard warning signs.

Not all harmful substances come in labelled containers. Substances can be generated during work activities (eg wood dust from sanding, solder fumes).

Remember that handling some 'natural' substances like foods and flowers can cause skin problems too. If you are unsure if a substance emitted from a work process or natural substance you are handling is harmful, you can get information from a variety of sources eg some materials associated with harm to the skin are listed in tables on the HSE website. You can also get advice from the University's Occupational Health Service.

Prolonged or frequent contact with water, particularly in combination with soaps and detergents, can cause dermatitis. 'Wet work' is the term used to describe tasks in the workplace that can cause this.

If work does involve skin contact like this you can take simple steps to reduce the risk and prevent skin problems.

What should I do about it? - Use the APC approach

Avoid direct contact between unprotected hands and substances, products and wet work where this is sensible and practical, for instance:

- Get rid of the substance, product or wet work altogether.
- Substitute the product or substance for something less harmful.
- Introduce controls (such as tools or equipment) to keep a safe working distance between skin and substances/products/wet work.

Protect the skin. Avoiding contact may not always be possible, however the following advice helps to minimise contact and protect the skin:

- Wear suitable personal protective equipment such as suitable gloves. The choice of suitable gloves may be complex so refer to the HSE website for further advice, as well as information from the PPE supplier.
- Use a mild skin cleaning cream and washing facilities with hot and cold water.
- Wash your hands before eating and drinking, and also before wearing gloves. Suitable cleaning systems should be provided for mobile workers.
- Wash any contamination from your skin promptly.
- Hot air hand dryers are used throughout the University – dry your hands after washing.
- Protect the skin by moisturising as often as possible and particularly at the end of the day – this replaces the natural oils that help keep the skin's protective barrier working properly.
- Use suitable pre-work creams.

Check hands regularly for the first signs of itchy, dry or red skin:

When skin problems are spotted early, they can be treated, which can stop them from getting too bad.

Seek advice from a medical practitioner if you suspect that you may have skin problems. Further advice is available on skin checks from Occupational Health.

Further information

Individuals who suspect they may have a skin problem should visit their General Practitioner for advice and treatment if needed. They should also inform the University's Occupational Health Manager if they have a problem.

The NHS also has useful information and advice on dermatitis, urticaria and skin cancer, available from their website.

The law requires employers to adequately control exposure to materials in the workplace that cause ill health. This includes controlling exposure to materials that cause skin diseases and to materials that enter the body through the skin and cause problems elsewhere.

Managers, staff and students need to comply with the Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH). They require employers to:

- assess risks;
- provide adequate control measures to reduce risk and ensure their use and maintenance;
- provide information, instruction and training;
- provide health surveillance in appropriate cases.

More detailed information on legal requirements

Manager's Duties

Managers must ensure that a suitable and sufficient risk assessment is carried out for all operations in their area of control where staff, students or others could be exposed to substances hazardous to health and also that this risk assessment is reviewed and updated as necessary. Managers must also ensure that staff and students adhere to any control measures put in place to reduce risk as required by the risk assessment. They may delegate the function of carrying out the risk assessments and supervising their enforcement but retain the responsibility for ensuring this.

"Suitable and sufficient" is more fully defined on the website of the HSE but, briefly, means that the risk assessment addresses the relevant hazards, puts in place appropriate control measures, and does this in sufficient depth and detail that is required by the level of risk involved.

Employees' duties

Staff also have legal duties under the law. They include:

- taking reasonable care for their own health and safety and that of others who may be affected by what they do or don't do;
- co-operating with the employer on health and safety;
- reporting any health and safety issues, including work related skin problems;
- attending for scheduled health surveillance appointments;
- correctly using work items provided by the employer, including personal protective equipment;
- using all safe systems of work in accordance with training or instructions;
- not interfering with or misusing anything provided for their health, safety or welfare.

Prevention or control of exposure

A risk assessment must consider whether it is reasonably practicable to prevent skin exposure. If prevention is not reasonably practicable, the assessment should identify how to ensure adequate control of skin exposure. The Control of Substances Hazardous to Health (COSHH) Regulations 2002, are 'goal setting' and recognise that risk cannot always be eliminated. The aim is therefore to reduce the risk of exposure to hazardous substances to a level that is as low as reasonably practicable.

Skin exposure risk assessment

A risk assessment should take account of the following:

- hazardous properties of the chemical(s);
- health effects caused by the chemical(s);
- routes, extent, frequency and duration of exposure;
- amount of chemical(s) used or produced (including those produced as by-products), released by chemical reactions during the process or found in waste products;
- type of work (such as emergency, maintenance or routine work);
- where it is carried out (eg fixed installation, temporary site or peripatetic work);
- effectiveness of controls. Those identified during the risk assessment or existing preventive or control measures;
- results of any monitoring data (eg surface contamination, skin contamination and biological monitoring);
- results of applicable health surveillance data.

Reviewing a risk assessment

Managers must review the assessment if:

- for any reason, it is considered to be not valid; or
- the work has changed and it has no close resemblance to that work the assessment refers to; or
- some other information has become available that indicates that the assessment is no longer valid.

Adequate control of dermal exposure

Where it is not reasonably practicable to prevent dermal exposure to chemicals, the manager must consider and apply, as appropriate for the circumstances of the work, the 'principles of good control practice'. To achieve adequate control of skin exposure this includes all of the following:

- design and operate processes and activities to minimise emission, release and spread of substances hazardous to health;
- take account of all relevant routes of exposure (skin, ingestion and inhalation) when developing control measures;
- control exposure by measures that are proportionate to the health risk;
- choose the most effective and reliable control options, taking into account ergonomics and ease of use;
- provide suitable PPE where adequate control cannot be achieved by other means;
- check and review of all control measures for their continued effectiveness;
- inform or train employees on the hazards, risks and use of controls measures;
- ensure that the control measures introduced do not increase overall risks to health and safety.

- COSHH requires employers to monitor the effectiveness of their controls and in some situations to carry out monitoring and/or health surveillance.

Dermal exposure monitoring

Before carrying out a dermal exposure monitoring exercise, it is important to establish a clear purpose, and to work out how you will assess the significance of the results and what you will do with them.

Dermal exposure monitoring should provide a demonstration that engineering and procedural controls are adequately controlling the exposure.

The results should be able to highlight where controls are not adequate, and target the areas where improved controls are required, or they should help to confirm that further control measures are not required.

If there are changes to processes, or work procedures, monitoring can be used to assess whether or not employee exposure has changed as a result of the changes.

The decision to carry out dermal exposure monitoring should be informed by:

- the COSHH risk assessment;
- whether control failure could result in a serious health issue (eg skin sensitisation or cancer);
- whether a suitable procedure exists or can be devised.

Health surveillance

As part of the risk assessment, managers should also find out whether health surveillance is required. Health surveillance is for the protection of individuals, to identify as early as possible any indications of disease or adverse changes related to exposure, so that steps can be taken to treat their condition and to advise them about the future. It may also provide early warning of lapses in control and indicate the need for a reassessment of the risk.

Because predictive tests are never likely to be totally reliable, and because certain known toxic agents still need to be used, dermatological health surveillance must never be regarded as reducing the need for control of exposure and effective decontamination after exposure.

When is health surveillance required?

This is required when:

- an employee is exposed to a hazardous agent; and
- the agent is known to be associated with an identifiable disease or an adverse effect; and
- there is a reasonable likelihood that the disease or the adverse effect may occur under the particular conditions of the work; and
- a valid technique is available that is safe to use in the workplace and is capable of detecting the early signs of the disease or the adverse effect caused by a hazardous agent; and
- the technique used is unlikely to place employees at an increased risk or to cause unacceptable harm to the employees; and
- it is likely to benefit the employee.

Situations where health surveillance is appropriate

The table below gives just a few examples of where health surveillance is appropriate. Skin inspection (SI) refers to carrying out health surveillance for 'local

effects' following skin exposure to hazardous substances, i.e. straightforward visual checks of employees' skin. Medical surveillance (MS) typically refers to health surveillance for 'systemic effects'.

Manufacturer's Safety Data Sheets for substances in use should give information about the requirement to carry out health surveillance when using them. Additional information is available from the HSE website. Further advice may be obtained from the University's Occupational Health Service.

Type of substance or process	Typical HS procedure
Substances known to cause severe dermatitis	Skin inspection (SI) by a responsible person
Substances known to cause skin sensitisation	SI. In some cases, medical surveillance (MS)
Substances known to cause de-pigmentation	SI
Substances known to cause oil acne	SI
Substance which may cause skin cancer	MS
Substances that can be taken up via skin	Biological monitoring and biological effect monitoring.
Manufacture, production, reclamation, storage, discharge, transport, use or polymerisation of vinyl chloride monomer.	MS

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