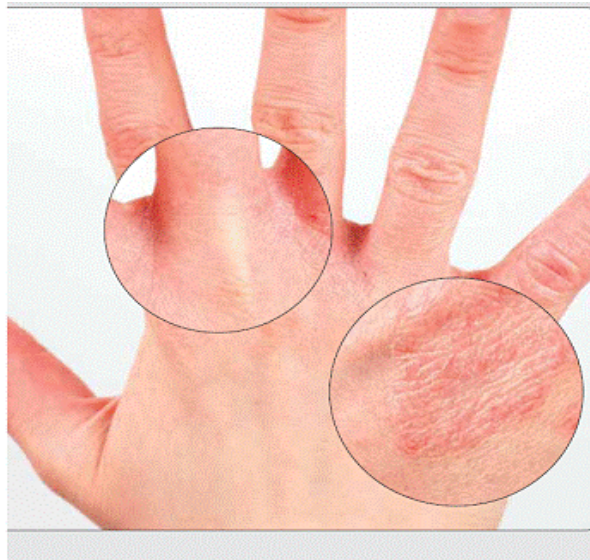




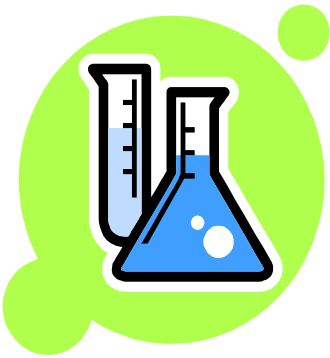
**Footwear and Leather Industries
Health & Safety
Committee**

PREVENTION OF DERMATITIS IN THE WORKPLACE

A guidance note for the footwear and leather industries



DERMATITIS



INTRODUCTION

Dermatitis is an inflammation of the skin, with swelling, redness and cracking of the skin's surface. There are two types of dermatitis:

- **Primary irritant dermatitis** can be caused by an irritating chemical material – for example, acids and alkalis. Skin damage will occur if this material is in contact with the skin for any length of time.
- **Contact allergic dermatitis** is a response to an allergic substance coming into contact with the skin. The individual will have been previously sensitised to the material. Virtually everyone may be allergic to some material.

In the footwear and leather industries, employees may come into contact with a number of chemicals which are likely to produce both a primary irritating dermatitis and, also, contact allergic dermatitis. These chemicals include strong acids, hexavalent chromium formulations, epoxy resins, latex, rubber chemicals, soaps and cleaners, wet work, enzymes and fat liquors.

WHAT THE LAW REQUIRES

The Health and Safety at Work etc. Act 1974 requires employers to ensure the health, safety and welfare at work of their employees, and anyone who might be affected by their activities. It is also the duty of employers to make arrangements for ensuring the absence of risks to health in connection with the use, handling, storage and transport of articles and substances.

Other relevant legislation includes the Management of Health and Safety at Work Regulations 1999; the Control of Substances Hazardous to Health Regulations 2002 (COSHH) the Workplace (Health, Safety and Welfare) Regulations; and the Personal Protective Equipment at Work Regulations 1992.

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MANAGING RISK AND GOOD WORKING PRACTICE

The following three simple steps can help prevent dermatitis:

- ✓ Protect the skin
- ✓ Avoid contact with materials that cause dermatitis
- ✓ Check for early signs of dermatitis

Steps should be taken in order that workers can avoid contact with materials that cause dermatitis by changing the task or process, such as:

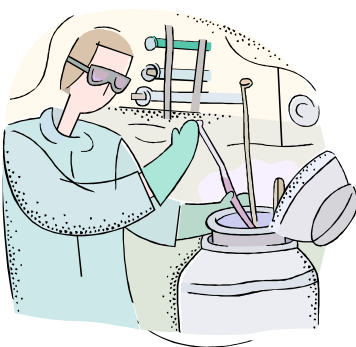
- ❖ Avoid using hazardous substances
- ❖ Substitute a more hazardous material with a safer alternative
- ❖ Automate the process
- ❖ Enclose the process as much as possible
- ❖ Use mechanical handling
- ❖ Use equipment for handling
- ❖ Don't use the hands as tools
- ❖ Use a safe working distance

Skin will need to be protected. This is particularly important if the steps above are not practical or are not enough to totally avoid contact. This can be done by:

- Using suitable equipment to prevent contact with exposed areas of skin on the body and limbs, eg armlets, aprons, etc
- Using suitable protective gloves or other PPE where necessary
- Knowing how to correctly put on and take off protective gloves
- Ensuring hands are washed and dried regularly, including before and after wearing protective gloves
- Using pre and after work creams to ensure good skin condition
- Advising employees how to look after their skin



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- ✚ Hands should not be immersed in chemicals or have prolonged contact with water
- ✚ Chemical splashes on the skin should be avoided
- ✚ Avoid creating dust and vapours and the use of liquid aerosols in the work environment
- ✚ Skin should not come into contact with contaminated workpieces, surfaces, tools, clothing etc.

REQUIREMENTS OF THE CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH) REGULATIONS 2002

Employers are required to identify the hazards associated with substances in the workplace, such as chemical agents, and assess the extent of likely exposure when these substances are used. Based on these assessments, they must then determine the health risks. Once a judgement of the risks has been evaluated, controls to minimise these must be put in place. *The law is clear. Until this has been done, employees may not work with substances hazardous to health.*

To comply with COSHH these eight steps should be followed:

- Assess the risks
- Decide what precautions are needed
- Prevent or adequately control exposure
- Ensure that control measures are used and maintained
- Monitor the exposure
- Carry out appropriate health surveillance
- Prepare plans and procedures to deal with accidents, incidents and emergencies
- Ensure employees are properly informed, trained and supervised

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The Workplace Health, Safety and Welfare Regulations 1992 cover a wide range of basic health, safety and welfare issues and apply to most workplaces. See *COSHH Essentials* on www.hse.gov.uk

HEALTH SURVEILLANCE

Following a COSHH assessment employers should determine whether health surveillance is required. See *appendix 3 – questionnaire for detection of skin abnormalities*.

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. However, employers should be aware or be made aware that health surveillance is not a substitute for the required control measures, but it is required as a part of the risk management package.



To meet the requirements of the COSHH AcoP, as a minimum, employers should be aware or be made aware that health surveillance is not a substitute for the required control measures but it is required as a part of the risk management package.

A responsible person is a person appointed by the employer, who, following instruction from a medical practitioner (or occupational health nurse), is competent to recognise the particular signs and symptoms of the skin conditions associated with the substances concerned.

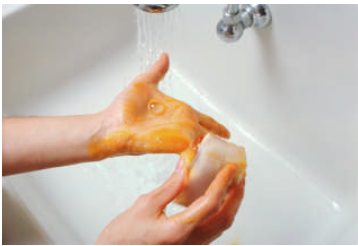
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The responsible person is charged with reporting his or her findings to the employer, but he or she should also have access to a suitably qualified person (eg an occupational health nurse or medical practitioner), to whom all suspected cases should be referred.

SKIN CREAMS AND SKIN PROTECTION

There is a wide variety of creams available, though they generally fall into one or two categories: pre- or after- work.

Pre-work creams – this concept has existed for over fifty years. The creams are often known as “barrier” creams and are generally formulated to repel oil, grease, paint, or solvents etc., or water-based products such as weak acids, alkalis and metalworking fluids. Some creams claim to give protection against both. Pre-work creams are designed to provide a protective layer between the skin and the substance.



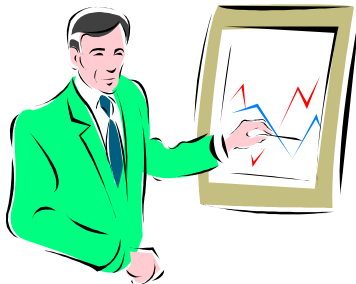
After-work creams – these are general purpose “moisturisers” designed to replace the natural skin oils removed by washing and solvent action of substances in contact with the skin.

What level of protection can pre-work creams give? – Pre-work creams are not “liquid gloves” – there is no such thing. They will not give the same level of protection as properly selected gloves. Creams should never be used if a glove will do the job because:

When washing their hands, most people regularly miss certain areas. Equally, the same tends to be true when applying a cream. Areas of the skin may be left unprotected – the equivalent of wearing gloves with holes!

When selecting gloves it is necessary to take into account how quickly the hazardous substance will penetrate the glove material (known as the “permeability”).

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The gloves selected should give an appropriate level of protection. Check with the PPE supplier.

PPE should be clean and intact. If gloves are to be used for long periods it could be beneficial to use absorbent (eg cotton or silk) undergloves which will reduce the effect of sweating.

Particular care should be taken with latex gloves as some people may be sensitive to them and a suitable alternative should be made available.

Personal protective equipment (PPE) is subject to wear and tear. With gloves this can easily be checked.

Creams begin to wear off as soon as work commences, but the loss of protection is unlikely to be so apparent.

INFORMATION, INSTRUCTION, SUPERVISION AND TRAINING

COSHH requires that employees are supplied with suitable and sufficient information, instruction and training which should include:

- The names of the substances worked with or exposed to, the risks created by such exposure and access to any safety data sheets that apply to those substances
- The main findings of the risk assessment
- The precautions they should take to protect themselves and other employees
- How to use personal protective equipment and clothing provided
- Results of any exposure monitoring and health surveillance (without giving individual employees' names)
- Emergency procedures which need to be followed

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Information, instruction and training should be updated to take account of significant changes in the type of work carried out or work methods used. It should be ensured that given information etc should be appropriate to the level of risk identified by the assessment and in a manner and form in which it will be understood by employees.

These requirements are vital. Employees must understand the risks from the hazardous substances they could be exposed to. Control measures will not be fully effective if employees do not know their purpose, how to use them properly, or the importance of reporting faults.

Information should be given in a way that all employees can understand.

Employees and Safety Reps

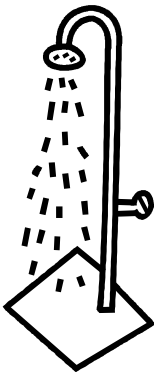
Consulting with trade union appointed safety representatives (*see Safety Reps and Safety Committee Regulations 1977*) or other employee representatives (*see Health & Safety Consultation [with employees] Regulations 1996*) is a legal requirement. Working with safety representatives and employees' representatives is a very useful means of communicating on health and safety matters in the workplace.

Remember: involving employees in decisions can help to foster closer working relationships and make employees more receptive to new ideas.

WELFARE

Sanitary conveniences and washing facilities should be provided at readily accessible places.

They and the rooms containing them should be kept clean and be adequately ventilated and lit. Washing facilities should have running hot and cold or warm water, soap and clean towels or other means of cleaning or drying.



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If required by the type of work, showers should also be provided. Men and women should have separate facilities unless each facility is in a separate room with a lockable door and is for use by only one person at a time.

Drinking water – an adequate supply of high-quality drinking water, with an upward drinking jet or suitable cups, should be provided. Water should only be provided in refillable enclosed containers where it cannot be obtained directly from a mains supply. The containers should be refilled at least daily (unless they are chilled water dispensers where the containers are returned to the supplier for refilling). Bottled water/water dispensing systems may still be provided as a secondary source of drinking water.

Accommodation for clothing and facilities for changing should be provided to store workers' own clothing and special clothing. As far as is reasonably practicable, the facilities should allow for drying clothing. Changing facilities should also be provided for workers who change into special work clothing. The facilities should be readily accessible from workrooms and washing and eating facilities and should ensure the privacy of the user, be of sufficient capacity and have seating.




USEFUL SOURCES OF INFORMATION

A range of free leaflets providing advice and guidance.







- MISC762 - Look after your hands in the kitchen [PDF 50kb] 
- Preventing dermatitis at work. Advice for employers and employees [PDF 76kb] 
- MS24 - Medical aspects of occupational skin disease [PDF 46kb] 
- Selecting protective gloves for work with chemicals: Guidance for employers and health and safety specialists [PDF 100kb] 
- Keep your top on: Health risks from working

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- in the sun [PDF 75kb] 
- Sun protection, advice for employers of outdoor workers [PDF 680kb] 
- Controlling health risks from the use of UV tanning equipment [PDF 33kb] 
- TUC "Hazards at Work" www.tuc.co.uk
- Community trade union CD "Health & Safety – an informal guide for union reps" www.community-tu.org.

Skin care/glove posters:

- Skin contact - distance your skin from chemicals and we work [PDF 80kb] 
- Hand washing and applying hand cream [PDF 56kb] 
- Method for using hand cream, soap and cleanser [PDF 68k] 
- Skin checks for dermatitis [PDF 68kb] 
- Reusable gloves (chemical resistant) [PDF 74kb] 
- Single use gloves (splash resistant) [PDF 65kb] 

Further Reading:

- COSHH essentials: Easy steps to control chemicals – Control of Substances Hazardous to Health Regulations HSG193 (Second edition) HSE Books 2003 ISBN 0 7176 2737 3 (Also freely available on the Internet at COSHH Essentials)
- Assessing and managing risks at work from skin exposure to chemical agents: Guidance for employers and health and safety specialists HSG205 HSE Books 2001 ISBN 0 7176 1826 9
- Cost and effectiveness of chemical protective gloves for the workplace - Guidance for employers and health and safety specialists. HSG206 HSE Books 2001 ISBN 0 7176 1828 5
- Choice of skin care products for the workplace - Guidance for employers and health and safety specialists. HSG207 HSE Books 2001 ISBN 0 7176 1825 0
- Control of substances hazardous to health. The Control of Substances Hazardous to Health Regulations 2002. Approved Code of Practice and

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	<p>guidance L5 (Fourth edition) HSE Books 2002 ISBN 0 7176 2534 6</p> <ul style="list-style-type: none">• HSE guidance note EH40 Workplace Exposure Limits• www.hse.gov.uk/skin/publications.htm <p>Control tools: COSHH Essentials provides good practice control approaches for a variety of tasks undertaken in a number of industrial sectors.</p>
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APPENDIX 1. Skin at work: action plan (www.hse.gov.uk/skin/actionplan.htm)

Practical action by employers is the key to preventing work related dermatitis caused by chemicals. A suitable step-by-step action plan may be summarised as follows:

- For every task undertaken at your workplace, know what products or substances are being used or generated.
- Find out what are the health and safety hazards associated with each of the substance or product used or generated. Find out whether these substances carry warnings signs and hazard information on dangers to the skin. You can find these on product labels and/or in Safety Data Sheets. SDS must be provided by the supplier of the chemical. It may be necessary to request this.
- Frequent contact with water (wet working) is a major cause of work related dermatitis (WRD). Some substances (eg: formaldehyde in metal working fluids) may be generated during work and can cause WRD. Take account of wet work and substances generated during work in the next step.
- Find out which of your employees are exposed to these substances, how does their skin come into contact, for how long and the frequency.
- Find out what control measure you have in place.
- Based on these, make a judgement whether your employees are at risk of getting work related dermatitis.
- If there is a risk of WRD, can you get rid of the chemical altogether? This is the best and simplest solution.
- If you cannot get rid of the offending chemical, are you able to replace it with a less harmful chemical?
- Introduce process controls so that skin does not come into contact with the chemical. If the contact is by immersion or splash, find a solution that would provide a safe working distance (SWD) between the chemical and the skin.
- If the exposure is due to dust, or vapour in the air, install a ventilated enclosure or provide local exhaust ventilation. Consult "COSHH Essentials". It is likely to provide a suitable engineering control for your task.
- If you have provided all the above controls and you consider that skin exposure could not be prevented altogether, then provide chemical protective gloves and coverall as appropriate. Selection of gloves is a complicated process. Always seek the help of your chemical supplier or a reputable PPE supplier.
- Make sure employees: have been taught safe working practices; can use the controls provided; have been trained to correctly use process equipment and PPE; know how to check their skin for signs of dermatitis; understand the benefits and limitations of skin care creams.
- Provide mild skin cleaning cream that will do the job and washing facilities with hot and cold water.
- Tell employees to clean their hands before consuming drinks and food or before wearing gloves.
- Ensure pre and post work creams are used.
- Seek the help of occupational health professionals if you suspect that you may have dermatitis problem at your workplace.
- Put in place a management system that checks that all of these actions are carried out in practice.

APPENDIX 2.

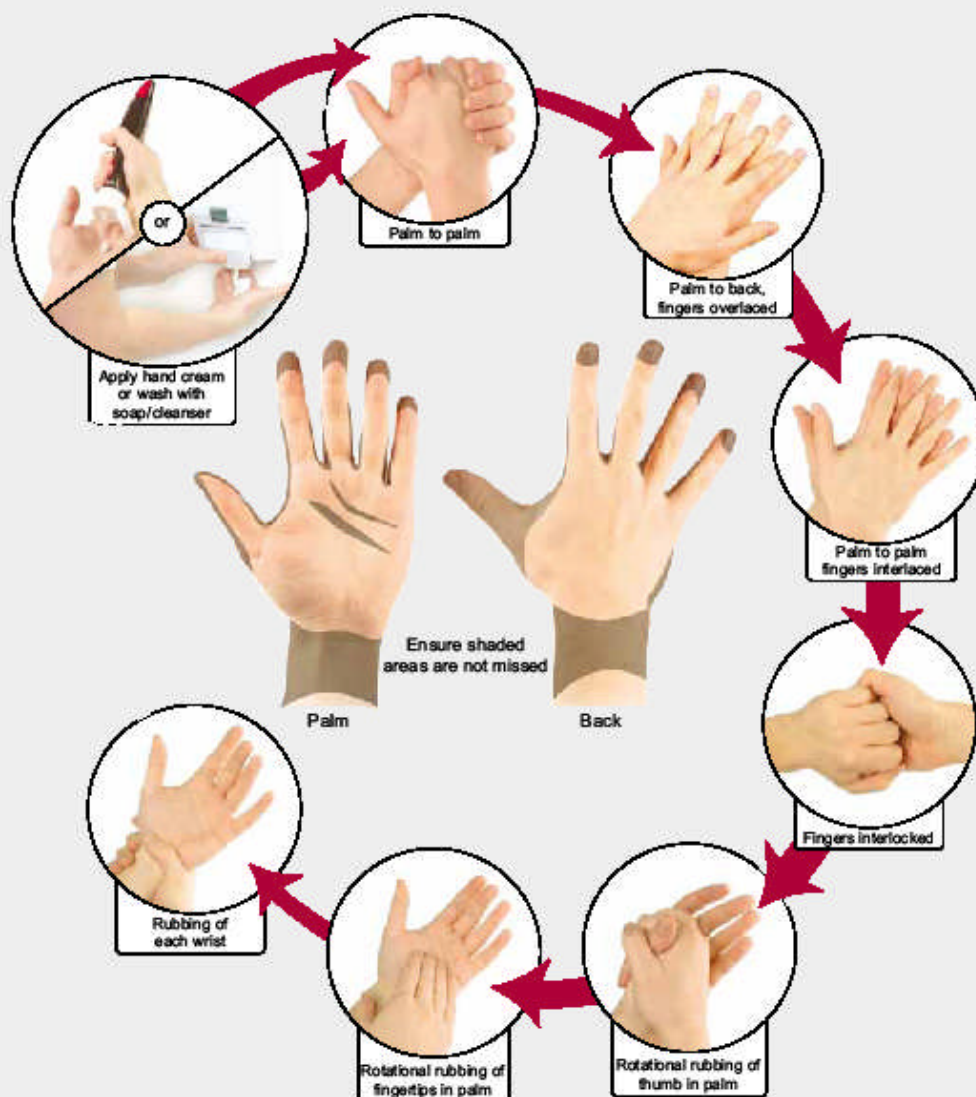


Health and Safety Executive

Skin Care

Method for using hand cream, soap and cleanser

Follow the steps shown



www.hse.gov.uk

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APPENDIX 3 Questionnaire for Detection of Skin Abnormalities

Section 1 (to be completed by employee)

Name: _____	Date: _____
Date of Birth: _____	Job Title: _____
Company: _____	

Section 2 (to be completed by employee)

1. Since your last review or in the last 12 months have you had any of the following symptoms?			
a. Redness and swelling of fingers or hands	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
b. Cracking of skin on fingers or hands	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
c. Blisters on fingers or hands	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
d. Flaking or scaling of skin on fingers and hands	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
e. Itching of fingers or hands with skin cracks or splits	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
f. Spots, redness, swelling of any other part of the body	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
2. Did these problems last for more than three weeks?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
3. Did these problems occur more than once?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
4. Does your skin get better with periods off work?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
5. Have you lost time from work with your skin problems since your last assessment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
6. Do you think you know what causes the problems?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
7. Name the substance/material/contact you think is responsible:			

Section 3 (to be completed by the responsible person)

1. Problems confirmed by the responsible person?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>
2. Action taken:			
Name of Responsible Person: _____			
Date: _____			

Footnote:

Any abnormalities should be referred to the works occupational health physician or nurse if there is one. If not, employees should be advised to consult their general practitioner. In either case, referral to a consultant may be appropriate.

APPENDIX 4.

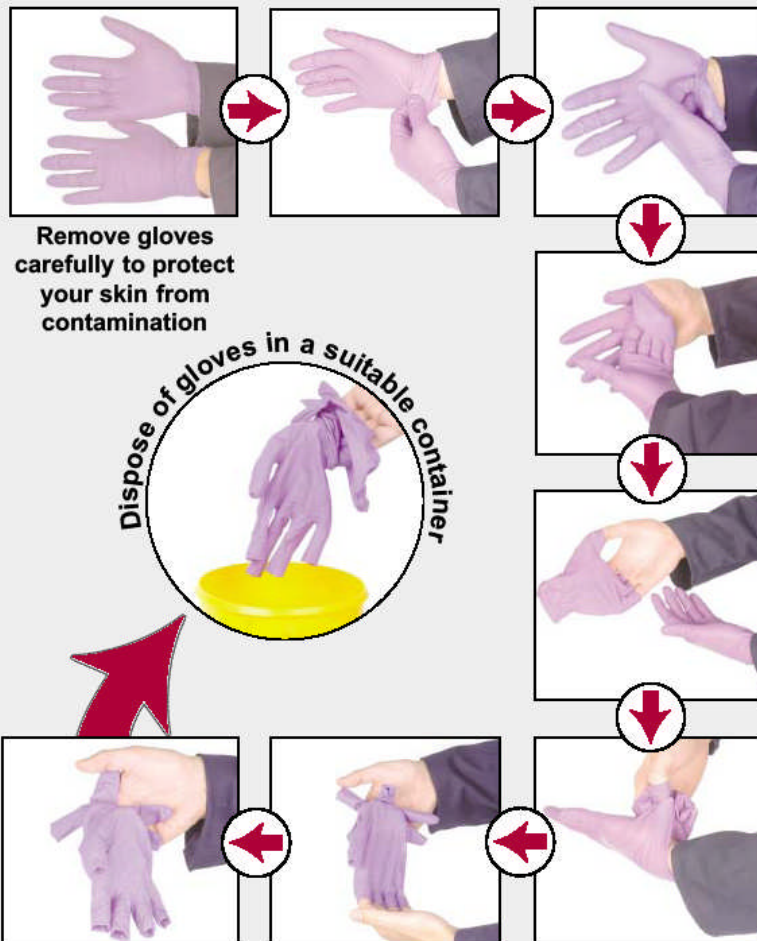


Health and Safety Executive

Correct removal of gloves

Single use gloves (splash resistant)

Follow the steps shown



www.hse.gov.uk

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This document will be available on the following websites:

British Footwear Association – www.britfoot.com

British Leather Confederation – www.blcleathertech.com

Community – www.community-tu.org