RPE Report on

Consultation Meeting and feedback with CBC trade staff on proposed RPE policy

Represented at the consultation for unite was Liam Rich

Introduction

We carried out a consultation meeting with staff members on 27th May 2022. There were 61 staff members attended with some great feedback and raised some very good valid points that we can put forward in this consultation. Unite do support that a policy needs to be implemented on RPE for the safety of all its employees, but some points need to be altered slightly, some need adding and other points we can't agree with to with the impact this may have on our members. In this report will highlight some key issues that need to be considered before implementing this policy and some suggestions that could help with the policy.

We have done extensive research into different methods or Masks, and it's been very difficult to find an air fed hoods or some other method to make it suitable to work with ACM's, I do agree that staff that work with ACM's will be required to shave to use the close fitting RPE mask to carry out these duties. I do hope in the future that with new designs and technology this may be achieved. Unite can't agree on the stance on a full facial hair ban until all the other COSHH risk assessments, control measures and the impact this will have on staff members have been assessed and implemented.

Statistics from the members that attended that we asked 4 questions to all attendees

These are the 4 questions we asked every group to get an idea of how many opposed the group.

Question 1 - How many people within this room don't agree with the proposed policy on RPE that requires you to be clean shaven to wear RPE.

Question 2 – How many are on neutral grounds that don't agree or disagree with the policy.

Question 3 – How many would agree to the policy being introduced and happy to be clean shaven.

Question 4 – Prepared to wear close fitting masks if additional payments were made.

7:30am Group 1

- 18 Attendees and 14 of them had visible stubble/beard/facial hair.
- Question 1 8 staff members don't agree with RPE policy
- Question 2 5 Staff members are neutral, they don't agree or disagree
- Question 3 0 Staff members would agree to the policy
- Question 4 8 Staff members would be happy if there were a money incentive.

8:45am Group 2

- 12 Attendees and 10 of them had visible stubble/beard/facial hair.
- Question 1 12 staff members don't agree with RPE policy
- Question 2 0 Staff members are neutral, they don't agree or disagree
- Question 3 0 Staff members would agree to the policy
- Question 4 6 Staff members would be happy if there were a money incentive.

10:00am Group 3

- 22 Attendees and 16 of them had visible stubble/beard/facial hair.
- Question 1 12 staff members don't agree with RPE policy
- Question 2 4 Staff members are neutral, they don't agree or disagree
- Question 3 0 Staff members would agree to the policy
- Question 4 9 Staff members would be happy if there were a money incentive.

11:15am Group 4

- 9 Attendees and 6 of them had visible stubble/beard/facial hair.
- Question 1 6 Staff members don't agree with the RPE policy.
- Question 2 1 Staff members are neutral, they don't agree or disagree
- Question 3 0 Staff members would agree to the policy
- Question 4 0 Staff members would be happy if there were a money incentive.

Key issue that was raised regarding the policy proposal, trails on the hoods and the other council's stance and policy on RPE.

- Staff may not have medical/skin issues now. However, this could become an issue if staff members are forced to shave every day or maybe 2/3 times a day with the 8-hour ruling. For example, if a staff members shaves at 7am for his normal day at work, they are then on emergency call out and get the first call at 6pm and the last on at 4am. This could mean they are shaving 3 times within 24 hours. This could cause skin irritation and medical issues for staff that may be unknown at this present moment.
- Not having all other Control measures, COSHH RA, Emergency procedures and tools and equipment in place.

- The hoods that were trailed were suitable for the Silica dust so could be suitable for majority of the scheduled work. The council did a trial on one hood in 3 different environments. It was mentioned that this wasn't a fair trial as they didn't have another hood to compare to. We didn't do a trial or presentation on a front feed hood. (One staff member who did the trial has tried another Mask and has stated it was more comfortable to wear)
- If the council are proposing the RPE policy so that every staff member needs to be trained to deal with Asbestos. It was raised in the consultation that it would need to be considered that council will need to provide all other equipment needed for to asbestos removal. Every van would potentially need to have H-Vac, a separate storage box to this equipment, another container for any asbestos that's been removed. Additional attachments for all different tools to extract any all dust from drilling etc. The policy and staff indicated that the mask is the last line of defence so if this approach is implemented then all other equipment would need to be provided.
- Red book would need to be evaluated. If staff need to treat all work that's not had an asbestos survey as containing asbestos, then this would require to be suited with all protective equipment for every job. What also needs to be considered is you can only use the tight face fitting RPE for a short period of time so this could then impact the time it would normally take to carry out the task. So would need to be evaluated before or if the bonus scheme returns.
- CBC has stated in Assessment report on the RPE that without this policy in place it has a huge effected the delivery of the service. No evidence was supplied to support the statement.
- Will the council be providing shaving equipment to staff?
- In the cat B training. The training only demonstrates to staff on the removal of a disposable mask. There is no training on how to clean and remove a face fitted RPE.

Things to consider

- This could cause staff to leave employment at CBC. In the current climate it may be a struggle to replace staff in the current climate with building trade sector in demand. This then could have an impact on the service of CBC.
- The impact this could have on the mental health of staff affected and their families. Some of these staff members have had facial hair their whole lives, some staff mentioned this during the consultation that it causes issues with their relationship to Children and Partner when he shaved for a face fit.
- If all staff are going to be trained to work with asbestos, then there is plenty more equipment, policies and training needs to be provided before this can be implemented, this is going to be a huge cost financially to the council with continuous testing and training for everyone, this also increases the RISK if everyone will be dealing with asbestos.

• This policy will have an impact on the whole operation if we can only be use close fitting RPE, the recommendations for wearing face fitted RPE I believe are around 1 hour. If staff could use positive pressure air respirator for non ACM's then the positive pressure mask can be worn for much longer periods. The hoods range can go up to 6 hours.

Suggestions

- Unite believe It would be beneficial for all parties involved if the council had a two-tier departmental working system. Staff that are happy to work with asbestos and be clean shaven for the Half face masks and have hoods for staff with facial hair. This has been implemented in this council and does work in local authorities around us.
- Suggestions would be do a trial on various hoods and masks to give more accurate feedback so staff can choose which mask is more comfortable to use.
- Having dedicated trained teams to deal with emergency call out, RR1 and RR3 that trained deal with asbestos or untested areas. Staff that are happy to be clean shaven.
- Train our own staff to do our own in-house asbestos testing. This then could reduce the cost the council spend on external companies. This would be beneficial to CBC financially, operational and works planning.
- Having dedicated staff or teams that are happy to work with ACM's. CBC have paid extra payment to these staff members before. This would reduce the overall cost of training, equipment, and testing.
- If any positive pressure RPE masks are introduce in the future where new designs or technology can then allow these hoods to be used safely with ACM's then these will be accepted and included into the Policy.

Amendments

Paragraph 1.1

Further regulations need to be added into the purpose, so it complies with other legislation. COSHH regulation 2002 and Control of Asbestos regulations 2012.

Paragraph 3.2.

Unite can't support that all staff to be forced to be clean shaven. We recommend having a two-tier workforce. We believe the organisation can continue effectively with dedicated staff that are happy to be clean shaven to deal with asbestos and staff that aren't face fitted. Staff have mentioned that CBC had been working effectively before with this method of a two-tier system.

Paragraph 5.2

This explains RPE should not be the first and only control measure considered. I think it needs some clear guidance on what control measures need to be considered prior and in what order. It needs explanation on hierarchy of control that should be applied to be included in this policy and not refer to appendix.

Paragraph 11.2

All other alternatives, control measures, reasonable adjustments must be explored before redeployment should be considered. This should be the last resort option.

Section 12

Unite can't support section 12, if staff members are being requested to work with asbestos as a reasonable management instruction. There are too many H&S concerns with the lack of COSHH RA, RAMS, lack of tools/equipment, emergency procedures and control measures to make staff members feel safe. This need discussed, agreed and implemented first. Until these issues are addressed then we can't agree to include this as it can cause issues.

Section 14.0

I would like included in this section a mandatory health surveillance checks on certain intervals for example every 2 years. It's not very clear on what sectors will require health surveillance or not. If this policy will be implemented, then all staff need health check-ups.

Recommendations to be included in the policy.

I think it needs adding into this policy for H&S guidance for time frame these RPE masks can be use for and will need to be included in RA.

If any positive pressure RPE masks are introduce in the future where new designs or technology can then allow these hoods to be used safely with ACM's, these will be included into this policy later.

Other Local councils haven't enforced this policy

DCC- Manager at DCC

They have never tried to enforce to be shaved. All planned work has an asbestos survey before they carry out the work.

They never work with asbestos as they have a policy on that.

They have two types of RPE, half face fits masks that's face fitted, Then the Lundstrom hoods for staff that have facial hair.

Rotherham council – Lee (Unite Rep)

They tried to enforce this policy 5 years ago. This was rejected, they now work with teams of staff that are prepared to work with asbestos and they get paid more money for doing that.

New starters contracts have now changed so it states they need to be clean shaven, however if they want to have a beard its written in their contract that they can choose a hood but they have to cover the difference if they want to have a hood.

Conclusion

We do agree that a RPE policy does need to be implemented, this will be help keep our staff members safe. We have done some extensive research into trying to find another alternative hood suitable for staff with facial hair that are able to work with ACM's, this has proved difficult as companies will not guarantee the decontamination process. So, we do agree that anyone working with ACM's will have to be clean shaven and wear the close fitting RPE masks. However, we can't agree to force staff members to work with ACM's, this has had some strong feedback for our members. This has not been mentioned within their job roles and working with Asbestos is a specialised area. I believe we could work around this extra planning and special dedicated trained teams to deal with ACM's, this can reduce cost considerably and reduce risk.