



Health Surveillance

Introduction

Health Surveillance is about putting in place systematic, regular appropriate procedures to detect early signs of work-related ill health among employees exposed to certain health risks; and acting on the results.

How is it done?

This depends on the type of health surveillance required when people are working with something that could harm their health. Various methods can be used:

- **A 'responsible person', such as a manager, looking** for a clear reaction
e.g. checking for skin conditions
- **A 'qualified person' asking** employees about symptoms, or inspecting or examining individuals for ill-health *e.g. OH Nurse doing lung function tests*
- **Medical surveillance** by a doctor which can include clinical examination
- **Biological and biological effect monitoring** to measure effects of exposure
e.g. blood tests
- **Keeping individual health records for all types**

Other elements include:

- **Self-checks by employees** to look for and report any signs of work-related ill health. BUT to comply with regulations these have to be part of a program in which health records are kept and where employees are:
 1. Trained about signs of illness or disease, and how and when to look for them
 2. Told how and when to report signs and to who – a responsible or qualified person
 3. **Also** subject to periodic checks by a responsible or qualified person
- **Baseline health assessment** on commencing a new post or placement

Why carry out health surveillance?

To benefit workers by:

- Detecting harmful health effects at an early stage
- Check that control measures are working
- Provide data by health records to detect and evaluate health risks
- Provide an opportunity to train and instruct employees
- Give employees a chance to raise concerns about the effect of work on health

But carrying out the health surveillance is not enough – ***you must act on the results.***

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Line Management Responsibilities

Ensure that:

- Risk assessments for work activity involving hazards; include consideration of the need for health surveillance.
- Where health surveillance of individual employees is deemed to be necessary, it takes place at the required frequency.
- The results of health surveillance are acted upon to meet statutory and management requirements
- The records of results of health surveillance are maintained to meet statutory requirements and are available to HSE Inspectors requesting them.

Employee Responsibility

To co-operate fully with employers' health surveillance programmes made during working time.

If the employee does not co-operate then we cannot advise management that the employee is fit to continue in those duties.

Making sure that health surveillance works!

1. Be clear about the purpose, who is in charge of the program, who is accountable for it and that the results are acted upon
2. Involve employees and their representatives, so that there are clear lines of communication
3. Introduce the right programme
4. Have clear roles and responsibilities, with competent people, and appropriate instructions and time scales
5. Record and act on the results in an appropriate manner
6. Certain groups may need special protection e.g. pregnant workers, young workers
7. Monitor and evaluate the programme

Health records

Health surveillance programs should include keeping a health record for each individual to provide:

- A historical record of jobs involving exposure to workplace hazards
- A historical record of the outcome
- Information for HSE or local authority inspectors

Ensure that the health records are completed routinely and systematically, are paper based or held on computer and, as a minimum, contain:

- ✓ Surname
- ✓ Forename
- ✓ Sex
- ✓ Date of birth

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- ✓ Permanent address
- ✓ NI number
- ✓ Date started present job
- ✓ Historical record of jobs involving exposure to the hazard for which health surveillance required during this employment
- ✓ Conclusions, decisions, fitness for work **(but not clinical information)**
- ✓ Date carried out
- ✓ Name of person carrying out the health surveillance

These records are subject to The Access to Health Records Act 1990 and Data Protection Act 1998.

Health records must be kept for as long as those employees are employed. Some specific regulations state that the records need to be kept for up to 50 years (e.g. Ionising Radiation).

It is good practice to offer the employee a copy when they leave the company.

Facilities

Where health surveillance involves inspections, examinations, taking samples and making enquiries it is essential that suitable facilities be provided. Rooms must have privacy, be clean, warm and airy, and have washing, lighting and separate toilet facilities.

Appointed Doctor

In certain circumstances, medical surveillance is specified, which states that the employee requires surveillance carried out by a registered medical practitioner, who is "appointed" by the Health & Safety Executive for this purpose.

Where these requirements exist, the employer must ensure that a doctor is appointed and that he has the required access to the site, both to carry out the surveillance, and be aware of the work practices.

RIDDOR Reporting

When a registered medical practitioner makes a written statement that an employee is suffering from a specific disease reportable under the regulations to the manager it is the managers responsibility to report under the Reporting of Injuries, Diseases, & Dangerous Occurrences Regulations 1995 (RIDDOR).

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Further Information

Legislation

The Health and Safety at Work Act 1974 Section 2(3)
Management of Health and Safety at Work Regulations 1999
Workplace (Health, Safety and Welfare) Regulations 1992
The Health and Safety (Consultation with Employees) Regulations (HSCER) 1996
Control of Substances Hazardous to Health Regulations 2002
The Control of Lead at Work Regulations 2002
The Control of Asbestos at Work Regulations 2002
Controlling Noise at Work Regulations 2005
The Control of Vibration at Work Regulations 2005
Diving at Work Regulations 1997
Ionising Radiation Regulations 1999

References

Understanding health surveillance at work: an introduction for employers
HSE Books INDG304 <http://www.hse.gov.uk/pubns/indg304.pdf>

Health surveillance at work
HSE Books ISBN 0-7176-1705-X

Noise at Work
HSE Books INDG362(1) <http://www.hse.gov.uk/pubns/indg362.pdf>

Control the risks from hand-arm vibration
HSE Books INDG 1759(rev2) <http://www.hse.gov.uk/pubns/indg175.pdf>

COSHH: A brief guide to the regulations
HSE Books INDG136(rev3) <http://www.hse.gov.uk/pubns/indg136.pdf>

Health surveillance for those exposed to respirable crystalline silica
HSE Books COSHH G404 <http://www.hse.gov.uk/pubns/guidance/g404.pdf>

Health surveillance for occupational asthma
HSE Books COSHH G402 <http://www.hse.gov.uk/pubns/guidance/g402.pdf>

Health monitoring for Chronic Obstructive Pulmonary Disease
HSE Books COSHH G401 <http://www.hse.gov.uk/pubns/guidance/g401.pdf>

Lead and You: A guide to safe working with lead
HSE Books INDG305 <http://www.hse.gov.uk/pubns/indg305.pdf>

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