

Visitor falls down spiral staircase

A visitor who slipped on an ancient stone spiral staircase has sued OPW for damages. The Pensioner alleges that he lost his footing while descending the staircase. He put his weight on the rope handrail. He alleges it failed to support him and he fell down six steps. The case came before the High Court in October and judgement is due shortly.

Claims resolved in OPW 2012

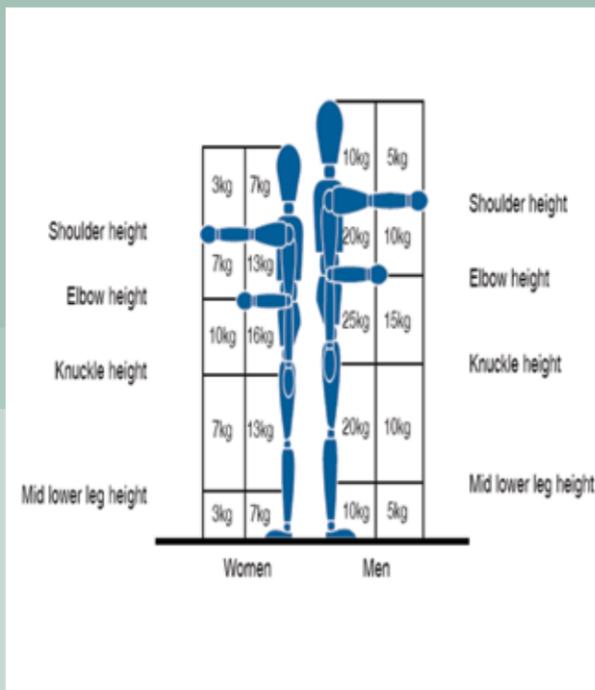
In the table below shows claims against OPW, which was resolved in 2012

Category of Claim	Count	Total Paid (€)
Employee	9	860,535
Member of public	6	100,843
Third party property Damage	8	13,357
Total	23	974,735

Manual Handling

From the number of incidents reported to Health and Safety Services, it has been noticed the increase in the number of Manual Handling incident in relation to staff in OPW.

The Manual Handling Regulations 2007 do not contain a specific duty on OPW to provide training in Manual Handling. But under Section 10 of the 2005 Act, states that an employer (OPW) must ensure that employees receive adequate safety and health training including, in particular, information and instruction relating to the particular task involved.



Guide on lifting

Manual Handling. Regulation 69 (c) of the Manual Handling Regulations places a duty on Employers (OPW) to carry out a Risk assessment in relation to manual handling, taken into account the Characteristics of the load, physical effort required, Characteristics of the working environment and the Requirements of the activity

In OPW, not only do the Manual Handling Regulations apply to industrial staff but also to permanent Staff. It is the responsibility of managers and supervisors to make sure that risk assessments on any manual handling activity in their functional work area are carried out and Staff received Manual Handling training.

BMS Staff take on new challenges on the streets of Dublin

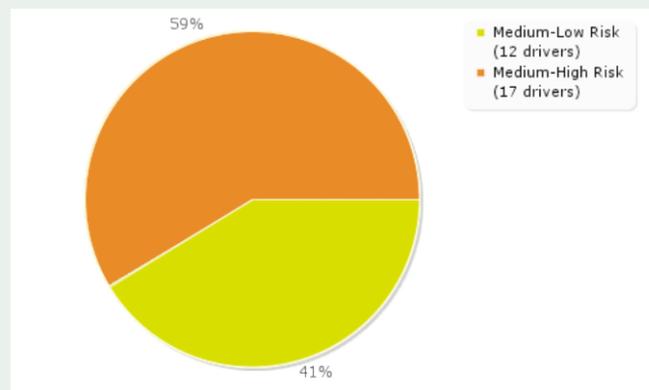
Dawn breaks over Little Green Street as BMS staff go to work removing feral vegetation from the old Debtors Court having first installed traffic management to comply with legislative and DCC requirements.



How competent are Drivers in OPW?

In order to make a recommendation on the best way forward in complying with Health and Safety legislation on Driving for Work, Health and Safety Services (H&SS) carried out an internet-based Driving survey involving 29 OPW employees from two divisions. The result of the pilot study is graphically shown below:

Driver Risk Distribution



Key findings of pilot survey:

- The overall rating for the two divisions is 'Medium Risk'
- 17 drivers rated 'Med-High Risk'; 12 drivers rated 'Med-Low Risk'
- Top risk areas identified include; journey length, driver training, road types, total driving
- 48% advised their typical work journey is between two and four hours
- 30% drive more than 40,000Kms per annum for work
- 41% have not had an eyesight test since 2011
- 66% have never had in-vehicle training, post test.

While drivers are responsible for how they drive, OPW as an employer has duties in helping to make driving for work safer.

Why OPW needs a chemical committee

You could write about legislation, best practice, health and safety, material data sheets or as we know a photo is worth a thousand words this one shows a small sample of highly flammable chemical recently located, stored beside a GAS fired heater.



Health and safety Services (H&SS) under the direction of the Safety Management Committee (SMAC) are co-ordinating a Chemical Committee that will have representation from across OPW and will be advised by a senior inspector from the Chemical Division of the Health and Safety Authority. The brief of the committee is to produce a "Code of Practice" on Chemical usage in OPW. If anybody reading this article and would like to contribute to the Code, they should contact H&SS.

Winter 2013



OPW

The Office of Public Works
Oifig na nOibreacha Poiblí

Health & Safety Newsletter



Health & Safety: Everyone's Business

Professor Anthony Seaton

Hazard and risk

The news media love accidents and disasters; they sell papers and give rise to a feeling, usually short-lived, of outrage. The papers feed off the victims' families and call for justice and commissions to be set up to ensure that such things never happen again. Or at least they do so unless the injuries are so commonplace to be accepted as a normal part of human activities. Death and serious injury in a car crash for example rarely merits more than a short paragraph in a local paper. Workplace deaths rank similarly unless they involve multiple people or particularly dramatic circumstances. Workplace illness goes largely unnoticed, yet in these islands many thousands of people are injured or fall ill each year as a result of their work. Without this sense of public outrage, how do we try to deal with this problem?

When I was a young doctor in the 1960s it was commonplace for workers to be paid danger money, a few shilling extra for accepting risks. This was negotiated by Unions at a time when they had been persuaded that accepting risks was an inevitable part of many manual jobs. Thankfully in the developed world this has changed, though it would be quite wrong to believe that this is the case world-wide, and in many countries today workers have no choice in this matter. Indeed, even in developed countries there are many employers, often remote from the workface, who are careless of the risks their employees run, but at least here they are subject to legal sanctions.

How do we go about preventing workplace injury and illness? In principle the process is quite simple: we recognise hazards (things which could possibly cause harm) and assess the risks from those hazards in terms of the likelihood of harm occurring. Next we write Regulations intended to reduce those risks to a level which is broadly acceptable to all concerned. Finally we come to the difficult bit, which is ensuring that those Regulations are enforced. This is difficult because it relies on Government to employ sufficient people to supervise their application, employers to ensure that they are observed, and you and me to apply them in our day-to-day activities – in other words their success depends on fallible human beings who may want to cut costs, save time or even just show off. When illness or injury occurs, it is usually as a consequence of several of these factors combining. Let me give you some examples.

1. The stone mason.

He had worked as a mason for 20 years and knew that dust was bad for the lungs, but had never had any chest trouble. When he started using powered tools the work became dustier, especially as the stone he was using was a particularly hard sandstone. He was provided with a helmet type respirator with a visor but no face seal. He asked for local dust extraction but the company said it would cost too much. After 5 years of this open air work he became breathless and was taken into hospital where he died of silicosis. A year later one of his colleagues died also. The work was stopped, the other masons were x-rayed and appropriate extraction and effective respirators were introduced. The employer was successfully sued in the Courts and paid out many times the cost of the extraction equipment to the two widows. For some reason in this case the managers were not put on trial and sent to prison.

This is tale of a disease that has been known for over 200 years and should have been prevented but wasn't because of complacency by managers who should have known better. The workers knew there was a risk but didn't realise how great it was. After the deaths occurred the workplace and working methods were improved and the masons now receive regular education on and equipment for prevention.

2. The painter.

He worked in a dockyard spray painting ships. All these men were experienced and knew that if they worked in confined spaces they sometimes felt a bit drunk; indeed they enjoyed their work and often would start singing. It was the habit of the foremen to call them out to the dockside for a breath of fresh air when the singing started. In spite of this precaution he often felt dizzy at the end of a shift and on one occasion the dockyard police stopped him on suspicion of having been drinking. After a few years he developed permanent unsteadiness and weakness of his limbs, and he was found to have serious brain damage, as were two of his workmates. This is a tale of poisoning by paint solvents which dissolve

in body tissues, especially the brain. We know these solvents are poisonous in high doses but easily become complacent as a result of familiarity. Brain damage can be prevented by not using solvent-based paints and by appropriate ventilation and use of effective respirators. Again, prevention here was the responsibility of both employer and employee, but the failure of managers to ensure that Regulations were observed led to many men suffering high exposures and some brain damage. Again, compensation payments put a heavy burden on the employer.



Recognising hazards

It is simplest to think of hazards in terms of being physical, chemical, biological and psychological, and of course hazards are present in everyday life as well as in the workplace. Physical ones include dusts, noise, heat and cold, moving equipment, things that can fall on you or that you could fall off, and so on. Chemical ones include substances in paints, varnishes, sprays, poisonous gases, oils and tars. Biological ones include plants (causing allergy or falling on you), animals (passing on infections or trampling on you), and microbes like bacteria and fungi causing disease. Psychological hazards come mostly from other people and pressures to achieve deadlines, bad managers, lazy co-workers, bullies and of course from one's personal capacities to withstand pressure. It is quite easy to look at one's own life and list the main hazards to which one is subjected or subjects oneself, and a lifestyle management programme would entail doing this and then assessing the risks.

Assessing risks

We all do this all the time, but often not very well. While I was planning this article I went into Edinburgh and had to cross a busy road. The green man was flashing and the buses were revving up. I decided to dash across but forgot that I was a 75-year old and no longer a rugby player. I slipped and fell headlong in the middle of the road. Fortunately the waiting drivers had made a better risk assessment having seen the silly old man hurrying in front of them and decided to keep their feet on the brakes, so I survived to write this and learnt a sharp lesson. It is so easy in a workplace to do the same as I did, take a short cut to save time. So we need to work out the likelihood of a bad consequence of whatever we are about to do. If we are using a chemical spray, for example, we should find out what it contains and how we should use it safely. If we are in charge of a public park we should assess the risks to the public and ourselves of falling trees or water hazards as well as the risks to our colleagues of the chemicals and equipment they use. We should all do this, for ourselves, for our co-workers and our employees.

Reducing risks

If you understand the risks you can make your own decision in everyday life on whether to accept, reduce or ignore them. The fact that people continue to smoke, however, tells us that we are not very good at making sensible decisions, so with most real risks in the workplace we need regulation and enforcement. Here, not just us but also our employer has a serious responsibility. Regulations are written in order to reduce risks, but are only effective if they are observed, so enforcement is necessary. Also necessary is education of those of us to whom they apply, since enforcement can never cover every contingency in every workforce. Those to whom they apply need to understand them and know how they are written for their own benefit. Ultimately you and I are every bit as responsible for our own and our colleagues' safety as are management. We can't just leave it to others. A worker has to rely on management to enforce the Regulations and provide appropriate preventive equipment, but an important role of Unions is to make sure that they do so. We all have a responsibility to behave as safely as is reasonable but we should not use Health and Safety as an excuse to avoid doing things that we don't want to do if any risks are easily managed. This is where common sense comes in, and there is always scope for a bit of that.

Emotional effects associated with a Fatality



Wednesday the 10th of July 2013 is a day that will never ever leave the minds of my friends and I. On that unforgettable day, we tragically lost a dear friend of ours. Abby was a remarkable person. He was loved by everybody who knew him and had such a radiant presence. He truly touched the hearts of many.

On the first week of July this year there was an immense heat wave in Ireland, with temperatures exceeding over the mid-twenty degrees. Every summer for years, my friends and I have gone down to the river Liffey in Castletown for a swim. On Wednesday the 10th of July, we had decided to go for a swim in the Liffey. Beside the river that day, there were many different groups of people our age and older. There was a lively atmosphere at the river that afternoon, with music playing and a lot of people swimming. Little did we know that we'd lose our dear friend Abby that day.

Abby was unable to swim and got into difficulties in the water. He was pronounced dead that evening in Blanchardstown hospital at 5:13pm. We couldn't believe it. How could something so tragic happen so quickly and easily? It didn't seem real then, it still doesn't seem real now, and it probably never will. We had been swimming in the river Liffey every summer for the past four years and it never even crossed our minds that something like this would happen to someone.

Young people are not fully aware of the dangers of water. In particular, swimming in rivers. Young people all over the country swim in their local rivers during the good weather, and are not fully aware of the dangers which it entails. Unfortunately, neither did my friends and I, until we witnessed it ourselves and lost one of our dear friends.

Overall, eight Irish people had lost their lives during the Irish heat wave in July and it's heart breaking to think that one of them is Abby. All of the people who have been effected by Abby's death have all learned the dangers of swimming in open water and its harsh consequences. Through the tragic story of our friend Abby, we'd like to teach other young people about the dangers of swimming in open water. Although it seems like great fun, the possible consequences make it really not worth it.

Abby was an amazing person who had a great impact on all the hearts he touched. He was a great friend who always knew how to make others smile. We all love and miss him dearly. *"Death leaves a heartache no one can heal, love leaves a memory no one can steal."*

Shannon

Health and Safety Services (H&SS) comments: H&SS are indebted to Shannon who is brave enough to share with us her memories of Abby and the emotional effect his death had on his friends. We hope her message will reinforce people's vigour in the prevention of accidents. H&SS would like to thank Abby's parents for permission to publish this article and all of us here in OPW send our condolences on their sad loss of Abby.

"Smiles, tears, of all my life! and, if God choose, I shall but love thee better after death".