SAFETY action RISK **COMMUNICATION OR HYSTERIA?**

Safety enforcement during pandemic

May 2020

RESPIRATORS N95 vs P2

CIRCULAR SAW ALERT

ARE YOU GUILTY OF NOT FIT TESTING MASKS?

ALCOHOL-**FREE HAND** SANITISER

What's New in May?

This month, whilst we adapt to the different working and social environment, Gary discusses the ethical dilemma of balancing the control of COVID-19 with other health and safety priorities in society.

We update you on safety enforcement during the epidemic and share a WorkSafe alert about circular saws. We answer your questions about the difference between N95 and P2 respirators and whether you can provide alcohol-free hand sanitiser in your workplace.

The team at Safety Action remain available to assist with your safety needs, including video consultations.

Stay safe and healthy!



Andrea Rowe

Workplace Manslaughter Laws Webinar

Workplace Manslaughter laws commence in Victoria on 1st July 2020. Due to COVID-19, we have replaced our breakfast briefing with a webinar (timing TBC soon). Andrew Douglas, Principal FCW Law, will explain how the laws are likely to pan out, and Gary Rowe, CEO Safety Action, will provide practical tips on safety leadership and governance to help avoid these risks.

Register your Interest here.

Sarah

SAFETY ACTION TEAM



Gary



Miriam



Stephen



Katie



Ben



Kirill

Risk Communication or Hysteria?

GARY ROWE, CEO SAFETY ACTION PTY LTD

Why do people over-react to some risks but appear comfortable with other things which pose a much greater risk?

There are two main purposes of crisis communication:

- 1. Raise the alarm when you need to alert people to a risk and encourage necessary precautions; and
- 2. Convey calming messages to minimise panic and irrational behaviour.

So, what should governments be doing right now?

It was reported that 20 people died in Australia in March as a result of the coronavirus. Clearly a tragic situation for the family and friends, but not a tragedy for the country as a whole.





In March 13,000 Australians died from all causes including cancer, old age, illnesses, viruses such as flu, suicides, and accidents. The Australian road toll each year exceeds 1,000 fatalities, and 95 people were killed in the month of February alone, but the higher losses on the road does not cause panic.

The virus toll in March would have been much higher without the sensible travel restrictions, social distancing, and increased hygiene rules we currently have, but what has the cost been to save each life?

Who is catching the virus and who is worst affected?

Very few Australians under 60 years of age have died as a result of the coronavirus, and the majority of virus fatalities were over 70 and most had an existing illness or respiratory vulnerability. *20 virus deaths in March & 13,000 died from other causes*

Virus deadly for elderly, particularly with existing illness There does not appear to be any appetite to publicly discuss alternate ways of protecting the vulnerable elderly without the crippling side effects on the wider community and huge cost which will likely impact on budgets for at least the next decade or two.

Every day the media announce with apparent delight, the extra number of virus cases around Australia and selected countries. Its' like a sick competition – who is "winning" today?

Media focus on bad news, not the good news What the media do not mention is the good news e.g. that the virus peaked in Australia many weeks ago (28 March) and has been dropping ever since.

Some ask - could we have saved more lives by putting the same effort and vast resources into safer roads and vehicles, or heart research, better solutions for the flu, or other risks?

The "flu" kills about 2,500 Australians every year & smoking about 20,000 We need balanced messages not just alarmistic daily statistics and worst-case scenarios. Worst-case scenarios are always alarming. For example, bees can kill is true, but they are unlikely to sting you, and even less likely to kill you. Similar to coronavirus unless you are over 60 with an existing illness.

What Have we Learned from this Epidemic?

- 1. Expect future epidemics, by whatever name, timing, or source.
- **2.** Expect future epidemics to <u>spread rapidly</u> & <u>interrupt local and international</u> <u>supply lines.</u>
- **3.** <u>Challenge the data and sectional interests</u> to ensure a balanced and cost-effective response.
- **4.** <u>Continue social distancing and good hygiene habits</u>, that we have perfected over recent weeks, as they have always been valuable if not fully recognised in the past eg also help minimise spread of flu and other viruses.
- **5.** <u>Improve working from home preparedness</u>, as this may be needed again or indeed become part of the new normal for many people.
- 6. <u>Update risk registers & contingency plans</u> to highlight the greater impact of epidemics.

For a full copy of Gary's article "Virus – Panic or Calm Down" <u>visit our website</u> or contact Safety Action on T. 03 85 444 300 or <u>enquiries@safetyaction.com.au</u>

PCBU & Director Fined for Acid Burns

A NSW PCBU and one of its officers were fined \$270,000 in April over a "litany of failures" after two workers suffered serious acid burns when sprayed with sulphuric acid.

The Judge heard that the company replaced a safer sulphuric acid product with a cheaper, more hazardous substance without informing workers. The burnt workers were not aware of the emergency plans and ran straight past poorly marked safety showers to the men's locker room showers, 60 metres away.



Safety Alert – Circular Saw Fatality

WorkSafe Victoria have issued a <u>safety alert</u> following a fatal circular saw accident where a worker sustained a serious laceration to his upper leg, severing his femoral artery.

A common cause of incidents involving handheld circular saws is when the saw kicks-back and the blade comes into contact with the operator.

WorkSafe Victoria have prepared the a <u>video</u> showing how to prevent accidents when using power saws.



On the lighter side....



The world's largest grand piano was built by a 15-year-old in New Zealand. The piano is a little over 18 feet long and has 85 keys – 3 short of the standard 88.

Bowler Hats were designed by London hatters Thomas and William Bowler (hence the name).

The hat was invented to keep horse riders' heads safe from branches and other obstacles.



Must we provide fire extinguishers?



We have been asked if workers that are working from home must be provided with a fire extinguisher for their home.

Whist remote workers do need an emergency plan (escape plan and emergency contacts), it is not mandatory to provide them with a fire extinguisher, unless their work poses a fire risk e.g. welding.

It is more important to confirm that workers have a clear path to escape, including door that can easily be opened from the inside.

What is the Difference Between an N95 and a P2 Respirator?



Disposable Respirator

N95 and the P2 respirators are essentially the same specification for certified half-face particulate respirators. These respiratory protective devices are intended to protect the wearer from airborne contaminants.

The mask needs to form a good seal on the face to ensure all air comes in through the filter to achieve efficient filtration of harmful airborne particles. The mask must be fitted and adjusted correctly to your face to provide the intended protection.

In the USA, the term N95 is used. In Australia, Australian/New Zealand Standard *AS/NZS 1716:2012 Respiratory protective devices* describe three classes of particulate filter, Class P1, P2 and P3. The P2 respirator is equivalent to the N95. The testing requirements are slightly different. See <u>fact sheet by 3M</u> explaining the different specifications.

AS 1715 requires initial & annual fit-testing To be compliant with *AS/NZS 1715:2009 Selection, use and maintenance of respiratory protective equipment,* initial and annual fit-testing should be conducted for workers required to wear respirators, particularly where exposure to contaminants could result in serious harm e.g. toxic dusts or covid virus.

What is a Surgical Mask?

A surgical mask is a loose-fitting, disposable device which provides a physical barrier over the mouth and nose.

Surgical masks are intended to primarily protect others, not the wearer, from the wearer's saliva and respiratory secretions. However, they may provide some protection for the wearer from large airborne droplets.

Surgical masks are not capable of being fit-tested as there is no air seal around the face.



Surgical Mask

Guilty of Not Fit Testing Masks?

Traditionally industrial workers wore respirators to prevent inhaling harmful dusts and fumes, but with the current epidemic health workers and others are increasingly wearing P2 face masks for protection against virus infection. Read more about <u>Respirators and their use for infectious diseases</u> in the 3M fact sheet.

Fit Testing Standard

The Australian Standard *AS 1715: Selection and Use of Respirators* has long specified fittesting of workers for each model of respirator, especially if the person is exposed to toxic fumes or harmful atmosphere.

Because each person has different features and facial shape, fit testing the worker with the selected respirator is important to ensure an effective seal can be achieved on their face.



Failure to fit test respirators risks workers having the inconvenience and potential discomfort but little or no protection. This occurs when air leaks into the respirator around the face seal without passing through the filter. P2 respirators are designed to trap harmful particles including bacteria and respiratory droplets.

Legal Requirements to Fit Test & Officer Negligence

Despite the Australian Standard (AS 1715) specifying fit testing, most Australian businesses which provide respirators have not been conducting fit testing. As most respirator use in general industry only involves nuisance dust or other low harm contaminants, the lack of fit testing is probably tolerable.

However, where workers could be exposed to highly toxic or harmful particles, such as silica dust or harmful pathogens, failure to fit test them with their respirators is likely to give rise to allegations of breach of the general duty of care, recklessness or even negligence for officers.

Training in Correct Use of Respirators

Undertaking respirator fit testing provides the opportunity to record evidence that the worker was trained in correct use, storage, and maintenance of their respirator, as this is usually included as part of the fit testing session.

Safety Action Fit Testing Services

The Safety Action team have been trained by the respiratory equipment specialists at 3M and use state-of-the-art scientific measurement of respirator fit.

Older style fit testing involved the person wearing their desired mask while a sweat smelling mist was sprayed outside the mask. If the person indicated that they smelt the mist the fit test failed. However, this old approach relies too heavily on their co-operation to accurately identify the smell and may compete with their desire to pass the test.

The latest fit test method, as used by Safety Action does not need any indication from the wearer, as a probe inside the mask detects any mist that by-passes the filter e.g. poor facial fit.



For a quote to conduct respirator fit testing for your team contact Safety Action T. 03 85 444 300 or enquiries@safetyaction.com.au

Can I provide alcohol-free hand sanitiser?

Due to the supply shortages, some workplaces are having difficulty obtaining alcohol-based hand sanitisers. We have been asked if it is acceptable to use alternative hand sanitiser products.

Alcohol-free hand sanitiser products include those containing Quaternary Ammonium Compound, commonly called 'Quat,' and Benzalkonium Chloride, two known products with anti-viral capabilities, commonly found in hospital grade disinfectant.



Hand sanitiser

Whilst government authorities do not officially recommend hand rub products with less than 60% ethanol or 70% isopropanol as active ingredients, experts say that alternative products are better than nothing. Where soap and water are not available and where alcohol sanitiser in not available or suitable, you may provide alternative products at your workplace.

See our website for more details.

Safety Enforcement During Epidemic

All WHS laws still apply

Australian workplace safety regulators, except Victoria, have issued a joint <u>Statement of Regulatory Intent</u> which applies for the duration of the current epidemic.

Whilst acknowledging the coronavirus has created an exceptional set of circumstances which have significantly impacted on those running businesses, the statement makes it clear they will continue to enforce the workplace safety laws, including issuing of notices and prosecutions where necessary.

However, the WHS Regulators will consider the pressure a business is under and apply a common sense and practical approach to enforcing WHS.

Regulators accept that many employers may not be able to currently do:

- Face-to-face training
- Practical hands-on demonstrations
- Close face-to-face supervision
- Safety committee meetings
- Face-to-face consultation

Activities that will continue include:

- a) High risk licences will continue to be processed.
- b) Prohibition and improvement notices will be issued where necessary, including if there are serious deficiencies in epidemic precautions.
- c) Accident investigations and prosecutions.

Inspectors will respond to emergencies (eg industrial accidents) and will collect witness statements and evidence for potential prosecutions.

This statement makes it clear that the workplace safety laws have not been suspended and need to ensure all we managers and supervisors do not use the epidemic as an excuse to lower safety standards. Safety authorities are also enforcing COVID-19 precautions including social distancing.



Image: Logan Insurance Brokers

Enforcement activity, investigations & prosecutions will continue