

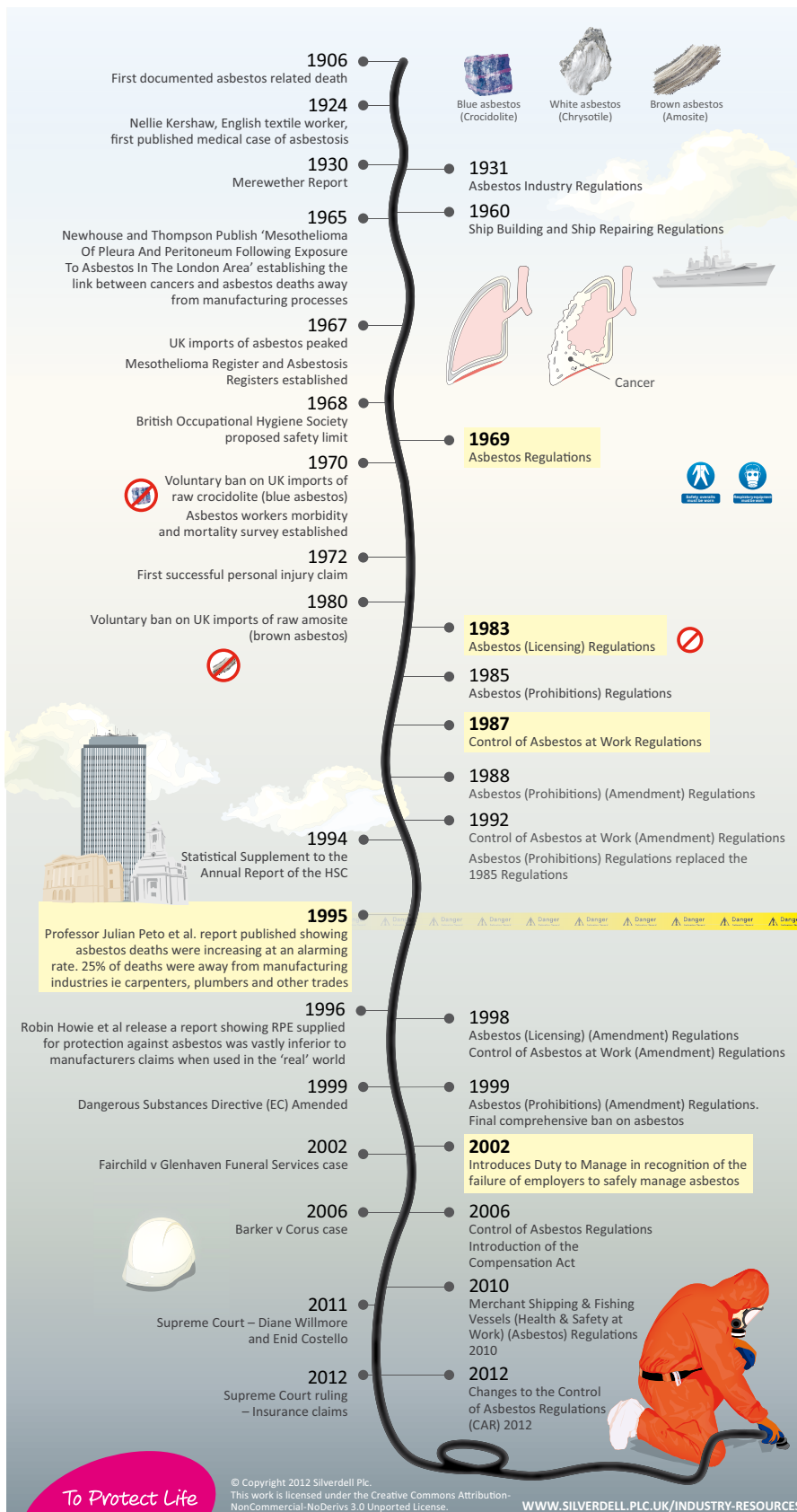
THE HISTORY OF ASBESTOS IN THE UK – THE STORY SO FAR...

ASBESTOS USES AND REGULATIONS TIMELINE



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To Protect Life

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1906 - 1930

1906

FIRST DOCUMENTED ASBESTOS RELATED DEATH – MURRAY’S CASE

Dr Hubert Montague Murray gave evidence before the Departmental Committee on Compensation for Industrial Diseases in 1906. Dr Montague Murray M.D., F.R.C.P. Senior Physician Charing Cross Hospital, was the first ‘expert’ to cite asbestos as the cause of death; his patient was 33 years old and presented to him in 1899 passing away in 1900.

The patient had worked for some fourteen years within an asbestos textile factory, ten of which were reported to be in the ‘carding room’. Carding is a process that was used in the asbestos factories and is still used today in wool and cotton mills. The process aligns fibres through brushing and breaking down clumps leaving fibres roughly parallel with each other. The ordered fibres are thus easier to handle and ready to be passed on to other processes. It is an extremely dusty process.

The 33 year old patient claimed to have worked in the carding room with ten other men, all of whom he had outlived and all of whom, he claimed, died in their thirties.

1924

NELLIE KERSHAW – COOKE’S CASE

Nellie Kershaw died 14th March 1924 aged 33 having commenced work at an asbestos mill aged 13. Her death was investigated and a report written by British pathologist Dr W.E. Cooke. Ms Kershaw is referred to in the Merewether report as Cooke’s Case. Dr Cooke coined the phrase ‘*pulmonary asbestosis*’ in his report into her death.

Ms Kershaw was denied compensation from the Turner Brothers (her employer) as they refuted that asbestos had contributed to her death. She was ineligible for aid from the government compensation scheme as the disease was not recognised. She was buried in an unmarked paupers grave.

1930

MEREWETHER REPORT

Merewether Report – This was a report commissioned by the Home Office to investigate the health of the Asbestos Industry following the death in 1928 of a man suffering from a case of non-tubercular fibrosis of the lungs, this case is known as Seiler’s Case. Tuberculosis is a contagious disease that causes fibrosis – scarring – of the lungs; Seiler’s Case showed that the fibrosis of the lungs was caused by asbestos, this was not expected.

Up to this point medical experts had attributed asbestos as a cause of death in only two other cases – Murray and Cooke.

The first attributed death occurred in 1900 and much of what is known about the case stems from the evidence provided by the pathologist Dr Montague Murray to the Departmental Committee on Compensation for Industrial Diseases in 1906.

The second attributed case was the Cooke Case – Nellie Kershaw.

The Merewether report proved to be a seminal point in the story of asbestos. Deaths of workers undertaking dusty work, presenting with fibrosis of the lungs and suffering a high mortality rate from pulmonary tuberculosis, had been found to be common in a number of industries and were being investigated; but in all such cases, the dust incriminated was free crystalline silica (silicosis) and asbestos as a cause had been completely overlooked.

The Merewether report was the catalyst for the 1931 Asbestos Industry Regulations.

1931 - 1965



1931

ASBESTOS INDUSTRY REGULATIONS 1931

Asbestos Industry Regulations. The first asbestos regulations introduced in the UK. These were designed to protect asbestos textile workers and required dust suppression during the dustiest activities – a list of activities controlled by the regulations was provided. The problem was that the regulations were not only industry specific but also task specific. They failed to protect many tens of thousands of workers and made the erroneous assumption that only the dustiest areas presented an unacceptable risk to health and overlooked those workers handling asbestos products as part of their trades.

The 1931 Asbestos Industry Regulations included requirements to suppress dust, provide medical examinations, and, importantly, through the Asbestos Industry (Asbestosis) Scheme 1931 brought the asbestos industry in to the Workmen's Compensation Act 1925 as extended by the Workmen's Compensation (Silicosis and Asbestosis) Act 1930. This enabled those suffering from asbestos diseases to receive some compensation when too debilitated to work.

1960

THE SHIPBUILDING AND SHIP REPAIRING REGULATIONS 1960

Shipbuilding and Ship Repairing Regulations, 1960 excluded the employment of young persons to work with asbestos and provided protective masks for those undertaking any work removing (by breaking down) or spraying of asbestos, cleaning sacks etc. In general this covered the dustiest tasks.

1965

MESOTHELIOMA OF PLEURA AND PERITONEUM FOLLOWING EXPOSURE TO ASBESTOS. NEWHOUSE & THOMPSON

Muriel Newhouse and Hilda Thompson published their epidemiological study '*Mesothelioma Of Pleura And Peritoneum Following Exposure To Asbestos In The London Area*' establishing the link between cancers and asbestos deaths away from manufacturing processes. This paper reported on some 83 cases of mesothelioma that had occurred over the previous 48 years. By taking the sufferers of the disease as the starting point [instead of the workers in the asbestos factories] and tracking the occupational history of the victims, they gained an insight into the true impact of asbestos in society. Their findings showed that many had not received any occupational exposure and there was a clear correlation between mesothelioma and living within the proximity of an asbestos factory. Many of those that had been exposed occupationally were not on the 'scheduled jobs' listed in the 1931 Regulations.

This report was followed up with an article on 31 October 1965 on the front page of the Sunday Times. This was a watershed in the history of asbestos and the Sunday Times article created great political and public debate. This brought asbestos irreversibly into the public domain. This article is often referred to as the point at which employers at large could no longer plead ignorance of the risk posed by asbestos in the workplace.

1967 - 1968



1967

PEAK OF IMPORTS OF ASBESTOS INTO THE UK

UK imports of asbestos peaked in 1967.

1967

MESOTHELIOMA AND ASBESTOSIS REGISTERS ESTABLISHED

The Mesothelioma and Asbestosis Registers were established to monitor asbestos related mortality in Great Britain. This register is used to this day and 1968 is the most common starting point for research studies as a result.

1968

BOHS PROPOSED HYGIENE STANDARD FOR CHRYSOTILE

In 1968 the British Occupational Hygiene Society proposed a hygiene standard for exposure to chrysotile (white asbestos) that was to have far reaching implications. It set the limit at 2 fibres per millilitre (f/ml) averaged over a three-month period to provide a 90% confidence limit in their calculation of acceptable risk. Acceptable risk being less than 1% of workers, exposed at this level, going on to suffer the first signs of asbestosis – with workers being regularly checked for these symptoms and, should the symptom occur, the worker would be removed from causes of exposure immediately.

Trevor Ogden – writing in the *'Annals of Occupational Hygiene. Volume 47 Issue 1'* penned a narrative titled *'The 1968 BOHS Chrysotile Standard'* which explains some of the history behind the standard, how it was reached and what was intended.

Based on this standard, the HSE adopted *'Standards for asbestos dust concentration for use with the Asbestos Regulations 1969. Technical Data Note 13'* and instigated an enforcement policy of measuring the airborne fibre concentrations over a 10 minute period and, if the concentration in air was less than 2 f/ml, the inspectorate would not require exhaust ventilation or other controls; if the 10 minute concentration was greater than 2 f/ml the Inspectorate would measure the average over a four hour period and if greater than 2 f/ml further action would be taken.

As stated previously, the original intention for the limit was that over a working life of 50 years exposure at an average fibre concentration of 2 f/ml of white asbestos with an average 40 hour working week less than 1% of workers would go on to develop early signs of asbestosis – relying on regular medical checks of workers to enforce this. To increase the reliability of this standard to a 95% confidence limit (from a 90% confidence limit) the limit would have been halved to 1 f/ml.

There were several errors in those calculations that have become very apparent with hindsight. This was aside from the incorrect assumption that the disease was not progressive once exposure had been stopped.

Arguably the biggest impact from this episode was the method of determining fibre concentrations using filters and the need to have quality control governing fibre counting; including regular inter-laboratory counting exchanges due to the differing counts from one person to another and between companies and countries. From these attempts to standardise counts was born the quality control systems that are with us today; manifesting in the form of UKAS, Regular Interlaboratory Counting Exchange (RICE) and Asbestos In Materials Scheme (AIMS). RICE and AIMS are operated by the Health and Safety Laboratory (HSL).

1969 - 1972



1969

ASBESTOS REGULATIONS 1969

The 1969 Asbestos Regulations applied to every process that used asbestos or any article containing asbestos that may produce dust when handled. The Regulations set no exposure standard, other than to say that exposure must be less than that necessary to cause injury – difficult to argue given the long incubation period for asbestos diseases.

The objective was to minimise exposure to asbestos dust. There was a statutory duty for employers to protect workers in factories, power stations, warehouses, institutions, and other premises.

There was an accompanying Department of Employment Technical Data Note 13 (1971) which discussed actions to be taken at different fibre concentrations [or gravimetric limits] which were linked to the BOHS recommendations in 1968.

1970

CROCIDOLITE; VOLUNTARY BAN

The 'voluntary' ban on UK imports of raw crocidolite (blue asbestos) was brought in by the asbestos industry. However the import of crocidolite-containing products was not banned. This was thought to be a political move as there was very little [comparatively] blue asbestos imported in a raw form in any case – 95% of all asbestos imported into the UK was Chrysotile or White Asbestos.

1970

ASBESTOS WORKERS MORBIDITY AND MORTALITY SURVEY ESTABLISHED

Asbestos workers morbidity and mortality survey established.

1972

SMITH V CENTRAL ASBESTOS CO LTD – FIRST SUCCESSFUL PERSONAL INJURY CLAIM

Towards the end of the late 1960's the first, ultimately successful, personal injury claim was launched, which reached the House of Lords in 1972 (Smith v Central Asbestos Co Ltd). Claims had been made for personal injury for many years and some had even reached private settlements but, having been taken all the way to the House of Lords – the modern equivalent being the Supreme Court – this case set precedent.

1980 - 1987



1980

AMOSITE; VOLUNTARY BAN

The voluntary ban on UK imports of raw amosite (brown asbestos) was brought in by the asbestos industry. The import of amosite containing products was not banned. Amosite was predominantly mined from a single location in South Africa, from whence it gets its name (AMOS – Asbestos Mines of South Africa) its mineralogical name being Grunerite. It was thus relatively unimportant commercially and a voluntary ban helped the industry carry on with minimal enforced regulatory controls in place.

1983

ASBESTOS (LICENSING) REGULATIONS 1983

Asbestos (Licensing) Regulations were introduced to control standards of workmanship by contactors within the industry, and to cover those working with high-risk asbestos materials. With some exceptions, all employers or self-employed people carrying out work with asbestos insulation or asbestos coating were required to hold a licence from the HSE and to comply with the terms of that licence. The regulations required workers to have medical examinations before starting work and subsequently every two years while still working with asbestos. These regulations also introduced notification to the enforcing authority prior to any work being undertaken – at the time this was 28 days. Very quickly there were several thousand licenses issued with minimal checks made prior to issue.

Within the licensing regulations was a definition of asbestos products – This was needed as the regulations relied on product types to define the need for a license to work on them or not. Any product that contained any asbestos, no matter how small a quantity, was an ACM (Asbestos Containing Material) and the licensing was defined through material classification; Asbestos coatings; and asbestos insulation.

1985

ASBESTOS (PROHIBITIONS) REGULATIONS

Asbestos (Prohibitions) Regulations. These prohibited the installation of asbestos insulation, asbestos spraying, and the importation, use and supply of crocidolite and amosite. These were the first asbestos prohibition regulations despite asbestos having been positively identified as a killer in 1900, 1924, 1928, incontrovertibly in the 1930 Merewether Report and in 1965 Newhouse & Thompson had shown the strong correlation between deaths away from the ‘high’ risk manufacturing processes while working with asbestos in an ancillary manner.

1987

CONTROL OF ASBESTOS AT WORK REGULATIONS 1987

Control of Asbestos at Work Regulations. These provided protection for all those who may be exposed to asbestos from work activities either in the asbestos manufacturing industry, or the asbestos removal industry. These regulations covered any activity that may result in exposure to asbestos dust in the workplace. The Regulations revoked the 1969 Asbestos Regulations and set control limits and action levels and required employers to provide respiratory protective equipment where it was not feasible to reduce exposure to below the control limits.

1988 - 1994



1988

ASBESTOS (PROHIBITIONS)(AMENDMENT) REGULATIONS 1988

Asbestos (Prohibitions) (Amendment) Regulations 1988 – Prohibited the supply of any paint or other composition intended to be used for spraying and prohibited any paint or varnish containing asbestos except where it was intended to be spray applied to cars as an underseal.

1992

CONTROL OF ASBESTOS AT WORK (AMENDMENT) REGULATIONS 1992

The Control of Asbestos at Work (Amendment) Regulations 1992. These regulations brought all amphibole asbestos up to an equal par – as opposed crocidolite and amosite at one level and chrysotile; fibrous anthophyllite; fibrous actinolite and fibrous tremolite at another lower level. Control limits and action levels were reduced (tightened); risk assessments made under these regulations had to be reviewed regularly; the plan of work was introduced; and, should there be an unforeseen circumstance that resulted in the control limit being exceeded any person liable to have been exposed had to be informed; and the retention of employees medical records was extended from 30 to 40 years.

1992

ASBESTOS (PROHIBITIONS) REGULATIONS 1992

The 1992 Asbestos Prohibitions Regulations replaced the 1985 Regulations. The Regulations extended the prohibition on the import, supply and use of any amphibole asbestos [thus including crocidolite, amosite AND fibrous actinolite, fibrous anthophyllite and fibrous tremolite] and products containing them, the spraying of asbestos and the installation of asbestos insulation. The regulations also prohibited many forms of chrysotile products which were listed in an attached schedule.

1994

STATISTICAL SUPPLEMENT TO THE ANNUAL REPORT OF THE HSC

Published in November, 1994, The Statistical Supplement (ISBN: 0-7176-0852-2) to the 1993/94 Annual Report of The Health and Safety Commission confirmed the continuing upward trend in deaths from asbestos-related diseases in Britain and predicted that the number of deaths from these diseases will increase “very probably until 2010 and possibly up to 2025.” The number of compensated asbestosis cases had trebled since 1981. Concern was expressed in this report about the occurrence of asbestosis resulting from exposure after the introduction of the 1969 Asbestos Regulations which are now widely accepted to have had limited effect in controlling asbestos-related occupational disease away from the manufacturing industries.

1995 - 1996



1995

CONTINUING INCREASE IN MESOTHELIOMA MORTALITY IN BRITAIN – ‘PETO REPORT’

‘Continuing increase in mesothelioma mortality in Britain’ written by J.Peto, F.E.Matthews, J.T.Hodgson and J.R.Jones. Peto et al undertook this study expecting to see deaths from asbestos beginning to plateau if not decline. His study found that deaths were increasing at an alarming rate and that 25% of those affected were from peripheral trades and not manufacturing – carpenters being the most affected. This report led to Asbestos Insulation Board (AIB) being brought into the licensing regulations (1998) and redoubled efforts from HSE to protect tradespeople in the construction and maintenance sector who were believed to be those most at risk at that time.

1996

WORKPLACE EFFECTIVENESS OF RPE FOR ASBESTOS REMOVAL WORK – THE HOWIE REPORT

The ‘Howie’ report, as it is known, undertook a study on the effectiveness of RPE used as protection against asbestos within the licensed asbestos removal industry. This study showed that quoted protection factors of 2500 were, in reality, closer to 40.

The protection factor is assigned to a mask/filter combination and is meant to be the factor by which the RPE (mask and filter) will dilute the exposure; thus if the fibres in air concentration was 2 f/ml, the actual air breathed in through the RPE, with a protection factor of 20, would be 2 f/ml divided by the protection factor of 20 thus meaning that the user of the mask would be breathing in a fibre concentration of 0.1 f/ml. As the fibre in air concentration, during asbestos removal work at that time, could regularly exceed 100 f/ml, this was disastrous. As such, workers were being exposed to asbestos fibre concentrations well in excess of the Control Limit – In other words they were being exposed to levels that were known to be unacceptably harmful to health.

This proved that the manufacturers’ claims were over optimistic. This led to much greater emphasis on the reduction of asbestos exposure to the lowest level reasonably practicable, whatever controls were in place. Up to this point, it was common to ‘dry’ strip asbestos within enclosures and not to be concerned with the method employed to remove materials, which is why asbestos levels were so high during asbestos works up to this point. With the 1998 regulations in place, dry stripping of asbestos was all but banned. This requirement to maintain exposures to ‘as low as reasonably practicable’ became the new Regulation 8 in the 1998 Control of Asbestos at Work (Amendment) Regulations.

1998 - 1999



1998

ASBESTOS (LICENSING) REGULATIONS 1983

Asbestos (Licensing) Regulations. The 1983 Licensing regulations were amended to require any work with materials likely to release significant amounts of asbestos to only be undertaken by licensed contractors. AIB (Asbestos Insulation Board) was brought under the Licensing regime as a result this gave AIB the prominence it deserved as a high-risk friable product for the first time.

AIB had been installed on a prolific basis – shops; schools; factories; offices; where it was used for fire protection; partitions; ceilings; risers; acoustic insulation – any position where a building board could be used.

1998

CONTROL OF ASBESTOS AT WORK (AMENDMENT) REGULATIONS

Control of Asbestos at Work Regulations. The 1998 CAWR reduced Control Limits and Action Levels, introduced the requirement to have UKAS accreditation and extended CAWR to cover any worker likely to be exposed to asbestos, including those in building and maintenance trades. It introduced the requirement to reduce levels of exposure to the lowest level reasonably practicable irrespective of enclosure or RPE – see above ‘Howie Report’.

The 1998 regulations extended the regulations to cover any exposure, whether you were working on an asbestos containing product or not; a requirement to keep the risk assessment and plan of work at the place where the work is being conducted; reduced the notice period to 14 days from 28 days; required RPE to be tested and monitored by employers; introduced the requirement for laboratories to have UKAS accreditation to the quality standard EN45001.

1999

ASBESTOS (PROHIBITIONS) (AMENDMENT) REGULATIONS 1999

Asbestos (Prohibitions) (Amendment) Regulations. These implemented the EC Directive 5 years before the deadline. These regulations banned the supply and use of chrysotile and chrysotile containing products while maintaining the existing bans on amphibole asbestos.

2002 - 2006



2002

FAIRCHILD V GLENHAVEN FUNERAL SERVICES

Fairchild v Glenhaven Funeral Services . Mr Fairchild, having been negligently exposed to asbestos by more than one employer, contracted mesothelioma. His battle for compensation, taken on by his wife after his passing away, was taken all the way to the House of Lords.

The defendants argued that as any one of them might have caused the claimant's death – admitting to having negligently exposed Mr Fairchild to asbestos – the burden of proof lay on Fairchild to prove which of the defendants had 'owned' the very fibre that physically triggered the cancer that subsequently killed him.

The defendants knew that this was an impossible point to prove. The House of Lords responded by stating that each of them had joint and several liability and introduced the concept of 'material contribution' as the test for liability as opposed to the '*balance of probabilities*' normally associated with personal injury claims. This '*material contribution*' meant that each employer was equally liable irrespective of the length or duration of the exposure they had caused the claimant to suffer. As a result there was no requirement for an apportionment of responsibility to each employer [as they were all equally liable] and a claimant could take action against any of those employers that had increased their risk of contracting an asbestos disease for the full claim.

2002

CONTROL OF ASBESTOS AT WORK (AMENDMENT) REGULATIONS 2002

The 2002 Control of Asbestos at Work Regulations further reduced the risk of exposure to asbestos through; the introduction of the Duty to Manage asbestos in non-domestic premises. This Duty to Manage placed an onus on all controllers of properties to manage the risk posed by all asbestos under their control. The result of this led to widespread pre-emptive asbestos surveys which in turn led to greater awareness of asbestos in the general working population – further regulatory changes included; reviewing plans of work; a requirement to set out emergency procedures; a requirement to undertake air monitoring where exposure may, or would, exceed the control limit; mandatory UKAS accreditation for bulk analysis; and they extended the duties on employers where an employee suffers as a result of asbestos exposure.

2006

BARKER V CORUS

In 2006 the House of Lords ruled in Barker v Corus that where an individual had been exposed to asbestos by multiple employers that each employer was responsible for an equal portion of the total compensation but not for the total amount where other parties no longer existed. This was due to complicating factors. In the earlier Fairchild case, each employer that had unlawfully caused exposure to asbestos was represented. In Barker v Corus, one employer had ceased to trade and the claimant had also spent some time as a self-employed plasterer.

The Law Lords ruled that it would be unfair to make those surviving employers (or their insurers) shoulder the entire burden of future claims, especially as they might have been only fractionally responsible – if at all.

2006 - 2010



2006

INTRODUCTION OF COMPENSATION ACT

Following the Barker v Corus judgement, there was an immediate backlash from MP's, Trade Unions and victim support groups. This led to swift action in Parliament to correct the perceived injustice this ruling would create if left as it stood. The direct result of this was the Compensation Act 2006 that was introduced to redress the balance and make all employers jointly and severally liable for the full amount of any compensation, as had been alluded to in the Fairchild case.

This legislation was necessary, as without it victims would only be able to receive their full entitlement if all negligent employers remained in existence. With asbestos diseases having incubation periods of up to 60 years, this would have left many sufferers without recourse to the full amount of compensation owed.

2006

CONTROL OF ASBESTOS REGULATIONS 2006

The Control of Asbestos Regulations; the driver behind these regulations was the EU Asbestos Worker Protection Directive which set minimum standards across member states for work on or near asbestos.

The UK Government used these regulations as an opportunity to amalgamate the Asbestos (Prohibitions) Regulations, Control of Asbestos at Work Regulations and the Asbestos (Licensing) Regulations.

These regulations saw a move from material classification for products requiring a license – introduced in the 1983 Asbestos (Licensing) Regulations – to a risk based licensing system; a greater emphasis on training of the 1.8 million workers HSE estimated are exposed to asbestos each year; a tightening of the accreditation standards for those certifying areas 'clean' after asbestos work has been completed; making UKAS accreditation mandatory for the Four Stage Clearance – the process of certifying an area fit for occupation following work on asbestos.

There was also an implementation of a single European wide control limit of 0.1 f/ml that the UK set as a time-weighted average over 4 hours. This limit was half the previous amphibole control limit 0.2 f/ml and the HSE estimated that if it had been in force in 2005 some 400,000 workers would have exceeded the new control limit. It is interesting to consider that these regulations, once implemented, made any work that would exceed the new control limit 'Licensable' while there are less than 9,000 workers in the country that have received the necessary medical to be able to undertake such work.

2010

MERCHANT SHIPPING & FISHING VESSELS (HEALTH & SAFETY AT WORK) (ASBESTOS) REGULATIONS

Whereas the Control of Asbestos Regulations 2006 implemented the EU Directive covering shore-based workers the 2010 Merchant Shipping & Fishing Vessels (Health & Safety)(Asbestos) Regulations did the same for workers on UK registered vessels and those vessels operating within UK waters. As such the requirements are very similar to the CAR 2006 and close the gap in legislation.

2011 - 2012



2011

DIANE WILLMORE V KNOWSLEY METROPOLITAN BOROUGH COUNCIL

Following a further challenge to the personal injury rulings, the Supreme Court ruled on two cases – Diane Willmore and Enid Costello – both of whom passed away during the legal process. Their cases were centred on the defendants claiming that they could not be held liable unless the claimant could prove that ‘*on the balance of probability*’ the defendants were responsible for the disease.

They accepted the test of material contribution where there was more than one defendant, but held that the test of ‘*the balance of probability*’ needed to be proved where there was only one employer who had unlawfully exposed the claimant to asbestos.

The defendants, Knowsley Metropolitan Borough Council and Greif (UK) Ltd, knew that such a test could not be proved as the science and knowledge to prove such a point did (and does) not exist. It is worthy of note that Diane Willmore was found to have been exposed to asbestos while at school.

The Supreme Court ruled unanimously that the test to be passed for a successful claim was that of ‘*material contribution*’ not ‘*the balance of probability*’ thus, any employer who negligently increases the risk of mesothelioma can be found liable irrespective of the exact quantity, severity or duration of exposure.

The latest HSE figures show that in 2009 over 4,700 people died from asbestos related diseases, a figure that has risen since records began in 1968.

2012

SUPREME COURT LANDMARK RULING

In March 2012 the UK Supreme Court made a ruling which could allow thousands of insurance claims by relatives of people who have died following exposure to asbestos. Currently, around 4,700 people in the UK die from asbestos related disease and that number is expected to rise to more than 5,000 per year and the route to fair compensation in the past has been notoriously slow and difficult to follow. The judgement removes the obstacle that the insurance companies sought to include which tried to define the insurance as only being valid on the date of diagnosis of the disease, not the date the exposure occurred.

2012

CONTROL OF ASBESTOS REGULATIONS (CAR) 2012

Changes to the Control of Asbestos Regulations come into force on 6 April 2012 following amendments to bring the UK legislation in to line with the minimum standards of the EU Asbestos Worker Protection Directive.

The biggest change affected the current “Non-Licensable” work on asbestos. This category represents the vast majority of all work carried out on asbestos within the UK, affecting some 1.8m workers annually. The “Licensed” category of work on asbestos – affecting some 9,000 workers – was not affected.

The “Non-Licensable” category have been split into two and an additional category created which is termed “Notifiable Non-Licensable Work” (NNLW). This now sits between the current “Non-Licensable” and “Licensable” categories. Works that fall into this category must be: notified, each worker exposed must have medical surveillance every three years and the employer must maintain a register for each worker of the type and duration of work done with asbestos - to be kept for 40 years along with copies of all medicals.

IN CONCLUSION



This article charts the history of asbestos but it is not exhaustive. Asbestos has had such a profound effect on society as a whole, that it is impossible to include every important event over its time. As such we have sought to highlight the dates and times together with covering information that are of a generalist nature.

Other aspects of the asbestos industry we have not covered include the detail on the commercial asbestos mines, the date products began to be used and details of the corporations that at one stage were some of the largest conglomerates in the world, before collapsing under the weight of litigation and claims of foul play.

The current worldwide consumption of asbestos is still near the highs of the 1970's with emerging economies replacing the western cultures that have largely banned asbestos products and raw imports.

This article and the asbestos timeline infographic are available to view and share on <http://www.silverdell.plc.uk/industry-resources>



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