Compass Group UK & Ireland

Occupational Dermatitis Policy

**Purpose**

To enable Compass Group UK & Ireland to identify and manage the risks associated with occupational dermatitis.

**Introduction**

The Health & safety regulations require employers to assess whether their employees are at a significant risk of suffering from work related illnesses such as dermatitis. If there is a significant risk, employers must take action to address the situation and make effective arrangements for its prevention in the future.

**Guidance**

Occupational dermatitis is one of the most widespread causes of ill health in many industries such as catering or cleaning. Catering related causes represent around 10% of all the cases that occur.

**Who is most at risk?**

Those most likely to be affected are - chefs, kitchen porters, catering assistants, waiting and bar employees and cleaners and those working in areas requiring frequent hand washing.

**What is Occupational Dermatitis and how is it caused?**

Graphical user interface, text, chat or text message

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| It is a condition of the skin caused by the skin coming into contact with a substance and becoming sensitised. Due to the increased frequency of using potential irritants, this can be more likely in the workplace.  Symptoms can include redness, itching, scaling, and blistering of the skin. If left untreated and condition deteriorates the skin can crack and bleed and become more sensitive generally. In work environments where catering and cleaning tasks are completed, it is usually the hands and forearms that are affected. |

It can be extremely painful, and many sufferers change employment to avoid encountering the substance that has caused it.

The most common causes are:

* Water, Soaps and Detergents (55% of cases).
* Food: e.g., sugar, flour/dough, fruits, vegetables, spices/herbs/seasoning, fish/seafood, meat (40% of cases).
* Contact with latex and rubber gloves and alcohol-based hand sanitizers’ (less than 5%)

Sensitivity can be caused by any substance, so if a reaction is noticed, be aware it may be contact occupational dermatitis, even if the skin has not been in contact with the irritant. How quickly it develops depends on the substance, the strength and potency. Sometimes it is caused by a combination of substances and circumstances.   
  
***Dermatitis is not infectious, so it cannot be passed from one person to another.***

***Although dermatitis cannot be passed from one person to another if the hands become infected due to severe dermatitis that pathogens within the infection such as (Staphylococci’s) can be passed through food****.*

**Can it be cured?**

If dermatitis is spotted early enough and adequate precautions are taken most people will make a full recovery. If left unchecked, it can become severe, and this is often not reversible. Some people can be affected for life. However, prevention is always better than cure.

**Procedure- Management**

**Find out if there is a problem:**

* Identify which team members come into regular contact with the above common causes of dermatitis.
* Check if there is any history of sickness absence due to skin problems. There may be isolated cases but investigate as there could be more.
* Always investigate any complaints from your team regarding skin problems.

**If you find no evidence of a problem:**

* Be vigilant. Inform and make sure your team is aware of the potential risk and ask them to report any possible problems.
* Make sure skin is adequately protected with suitable PPE for the task whenever possible e.g., whilst washing up/handling chemicals. Always use nominated Compass supplier for PPE.
* Use only nominated Compass chemicals, if requested to use a client chemical refer to your HSE lead to check if the substance poses a risk to the operator before using.
* Compass regularly review the chemicals in use to ensure the safest suitable option is being used.
* Make sure PPE is cleaned after each use and stored so that it does not become contaminated.

**If you find you have (or have had) a problem:**

* Discuss with the affected operator and ask they obtain guidance from GP as per Compass HR guidelines
* On receiving guidance from GP review the tasks the Operator is completing as part of job role -can the causes of the problem be removed, or isolated?
* Can contact to the substance be prevented in another way? For example, not touching the substance, wearing gloves etc. (Please ensure the correct gloves are being worn all Compass PPE supplied should be latex /natural rubber free – if gloves supplied with latex report via food buy).
* Use a moisturising barrier cream after washing hands on break and after finishing shift to help to replace the natural oils that the skin loses when washing and when in contact with detergents and solvents.
* Keep the skin clean.
* Ensure the PPE you are using is clean and free from contamination.
* When using diluted chemicals, ensure that there are diluted to the correct strength - if they are over strength, they are more likely to cause dermatitis.

***Then:***

* Ensure all applicable safe systems of work and control measures identified in relevant risk assessments or COSHH Product Assessments for the tasks or work activities are being implemented to prevent other employees getting occupational dermatitis.
* Monitor the situation to ensure the control measures are effective.
* If possible, review the operators job role to eliminate the contact with the irritant, if this is not feasible contact your HR business partner to discuss other options that eliminates contact with the agent causing the problem.
* Instruct employees how to minimize the risks, recognize early symptoms, and report these as soon as possible will help to prevent dermatitis.

**You *must* also:**

* **If confirmation of Occupational Dermatitis is received from the employee's doctor or Company Nominated Doctor, Occupational Health Practitioner, or other suitably qualified person, this must be reported to the Enforcing Authority. Contact your HSE Manager, Line Manager and HR Manager to inform them.**

The HSE Manager once the cause has been identified report the disease under the RIDDOR Regulations