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Scenario – Stage 1
You have identified that there is a significant hearing loss trend at a local plastics factory
There is also a couple of cases of significantly reduced lung function and you have concerns regarding sensitisation and one worker complaining about his eye sight
First steps – ask me for more information if needed.

CASE STUDY

- Plastics Industry
- Overview of site provided – Plastic extrusion
 - Finishing

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Stage 1 Results

Scenario – Stage 1 Anticipation and Recognition

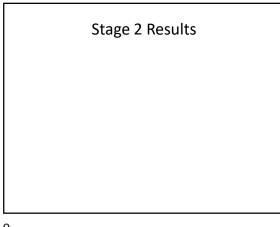
- Understand the process what do they make, how, with what products, what sort of finishing?
- Have a look
- Discuss
- SDSs, research processes and hazards, previous monitoring, health monitoring, incident reports, employee feedback

Scenario – Stage 2 Previous assessments

- Noise levels < 85 dBA (no knowledge of whether adjusted for 12 hr shifts)
- Dust one sample ~10xWES
- Styrene all below WES
- Nothing else ever tested

Scenario – Stage 2 Case Study – Health hazards recognised • Resin mixing, extrusion – – Poylurethane, polyester – Styrene, isocyanates, acetone, organic peroxides, toluene, fillers • Part cleaning – methylene chloride • Noise (throughout) • Finishing, dust, silica (respirable?)

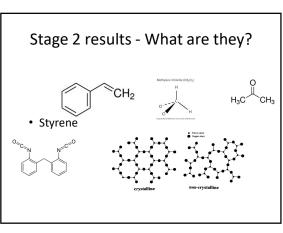
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Stage 2 results - Standards - Styrene

- NZ WES styrene 50 (TWA), 100 (STEL) need to adjust for 12 hr shift
- ACGIH TLV, European standards mostly 20 ppm (8hr TWA), 40 ppm (STEL or ceiling)
- Potential effects to hearing and vision <20 ppm
- Probable carcinogen (NTP 2011)



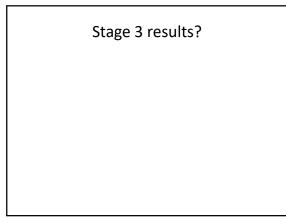
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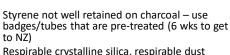
Stage 3: IF/What and How Would you Monitor

• Given the previous information

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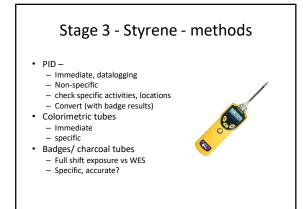
Stage 3 - Methods

- Respirable crystalline silica, respirable dust (samplers)
- Noise dosimetry

to NZ)

- PID (styrene, acetone) note: conversions etc
- LEL other gases
- · Colorimetric tubes
- Isocyanates specific methodology

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Scenario – Stage 4 **Results - styrene**

- Mixing shifts 10 to 20 ppm (badges)
- Up to 600 ppm cgeq on PID, incl STEL 200 ppm
- 2 hr exposure during cleaning 46 ppm (charcoal)
- Is the WES exceeded? Is the employer required to reduce exposure? Could health impacts be occurring? Actions?



- · Results are given on next slides
- Interpretation is required is there a health risk
- · Should further controls be implemented
- · What about further monitoring
 - Exposure monitoring
 - Health surveillance

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Results - Noise

- Most levels 80 to 85 dBA
- 12 hour shifts
- Dosimetry results almost all ~85 dBA (adjusted for 12 hr shift)
- Some tasks >90 dBA (v short duration)



Results – Silica and Dust

- RCS all below detection limit
- Detection limit exceeded proposed WES in one case
- One respirable dust 50% of WES when adjusted for 12 hr shift
- Findings on site very fine, not crystalline

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Interpretation/ Conclusions

- NZ Standards NOT exceeded other than noise
- Health effects likely (methylene chloride, noise)
- Ototoxicity
- Health effects possible (styrene, nanoparticulate silica dust, respirable dust, isocyanates)
- Health effects unlikely (acetone)

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Controls

- Elimination of methylene chloride by using kerosene based degreaser/parts cleaning
- Reduction of noise levels through buy quiet policies, further maintenance of equipment, use of plastic parts instead of metals in conveying systems
- Ongoing use of hearing protection in areas in which noise is greater than 80 dBA

Approximate Systeme concentration range Health triak 0 to 10 ppm Unlikely to be any. Odour threshold. Background, unlikely to be some rakes (as for 20 ppm) with extended and the ppm). 10 to 20 ppm Any be some rakes (as for 20 ppm) with extended and construct to the source of the coaled all contributes to beak (as for a 20 ppm). 20 to 50 ppm For organing, full with exponence (is to 1 be) and/or extended to contribute to beak (as for a 20 ppm). 20 to 50 ppm For organing, full with exponence (is to 1 be) and/or extended to contribute to beak (construction). 20 to 50 ppm For organing, full with exponence (is to 1 be) and/or extended to construct to beak construction. 20 to 50 ppm For organing, full with exponence (is to 1 be) and/or extended to construct to beak construction. 20 to 50 ppm For any full with exponence (is to 1 be) and/or extended to construct to beak construction. 50 to 100 ppm Fall with exponence is an other any (construction). 50 to 100 ppm Fall with exponence has potential for: - I can diright requering (dottaxicity) - I can diright requering (dottaxicity) 50 to 100 ppm Passible increased risk of longer term health impacts, including excention, when or the potential for: - Respective increased risk of longer term health impacts, including excention, when or the potential for order within the potent in effects have "been completive proven.

Stage 4 Interpretation - Results

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Further monitoring

- Exposure monitoring for isocyanates
- Baseline and regular monitoring of hearing and lung function
- Biological monitoring for styrene end of shift, mandelic acid in urine
- If exposure to TDI (toluene diisocyanate) is possible, biological monitoring for toluene diamine in urine, end of shift,

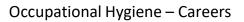
End of Case study – key references and links

- WESs and BEIs

 <u>https://worksafe.govt.nz/topic-and-industry/work-related-health/monitoring/exposure-standards-and-biological-exposure-indices/</u>
- NZOHS including links to training courses – <u>https://nzohs.org.nz/</u>
- OHTA Training Modules, including Basic Principals

 <u>http://www.ohlearning.com/training/training-materials/w201-basic-principles-in-occupational-hygiene.aspx</u>
 - Note: Basic Principals Course held in Auckland 11-14th June (NZOHS web site)

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- Certification (COH, CIH)

 specific training (post grad), 5 years experience, examination (written, verbal), competency
- New pathways intermediate options
- OHTA OH Learning. NZOHS running courses – Poss qual in specific field (e.g., noise assessment)

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