TURNER BROTHERS ASBESTOS COMPANY LTD.

To

J. Alderson, Esq.,
Newalls Insulation Co. Ltd.,
Washington.

ROCHDALE.

Ref. JW/AR

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Copies: NAM/RMB/JAEC/NLD

7th August, 1958.

Dear Mr. Alderson,

Medical Examination of Spray Operatives.

Mr. Clogg's letter of 17th July to Mr. Morling, of which you have a copy, suggests that you and I and someone from T.A.C. Co. Ltd. should have a discussion on this subject. A discussion would undoubtedly be useful but as we are now in the middle of the holiday season it would be rather difficult to arrange and Mr. Morling has, I believe, suggested verbally to Mr. Clogg that the subject might be pursued a little further by correspondence since any differences of view-point are not really very wide and might easily be resolved in this way.

In the meantime I have also had a letter dated 21st July from Mr. Pursey, of which Mr. Clogg has a copy which you may have seen.

First of all, I think you will realise that there is no question of J.W.R. Ltd. trying to lay down rules on this matter for the other Unit Companies to follow. We merely suggest that experience has shown that there is some risk of Asbestosis to people employed on the Spray operation and that some reasonable scheme of initial and periodic medical examinations seems, therefore, to be desirable, both for the protection of the workers and in order to prevent the process getting a bad name. We see no reason why there should not be differences in detail between the arrangements made by the various Companies to suit their own circumstances. I should like, therefore, to comment on the various points in Mr. Clogg's letter in this light.

I have no figures for the numbers employed by T.A.C. Co. Ltd. but it may be useful to mention that J.W.R. Ltd. at present employ 18 operators and 47 labourers. The numbers

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PLAINTIFF'S EXHIBIT
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fluctuate from time to time but this is a reasonable average. They tend to be employed at a relatively small number of different railway carriage building works, so that they are probably less scattered than your operators. The trained operators tend to be fairly constantly employed, being occupied on labouring work when contract work is slack; labourers are much more casually employed and many of them work for us only for a few months and are then not seen again.

It appears that you have a large number of tradesmen and labourers who are liable to be working near or in conjunction with the Spray process from time to time. Presumably most of these people are not regularly linked with the Spray process but are merely detailed to assist on particular Spray jobs from time to time. If so, we would agree that it would be both difficult and unnecessary to bring them into the medical arrangements scheme.

At the other end of the scale are the trained Spray operators, and I think we are in agreement that these men should be examined or checked periodically and that new operators should be examined as soon as practicable after appointment. I notice that you are concerned lest the institution of the scheme might be resisted by the men themselves or might cause repercussions in other trades. We had similar qualms in our factories when setting up our improved system of periodic medical examinations (separate from those carried out by the Pneumoconiosis Medical Board) a few years ago, but in practice the objections have been negligible and the scheme has been accepted as a matter of course. I hope therefore that you would find a similar absence of critical comment from your employees. It would, perhaps, not be very difficult to explain to any enquirer the difference between spraying into the air a deliberately flocculated fibre, on the one hand, and the application of wet plaster or moulded insulation on the other hand.

If the above suggestions are acceptable, you would still have the problem of the intermediate category - those tradesmen or unskilled labourers who are employed regularly in connection with the Spray process or to assist the operators. The problem is to interpret "regularly". Bearing in mind the limit of 8 hours a week used as a dividing line in the Asbestosis Industry Regulations, would it be reasonable to suggest that anyone employed directly in connection with the

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Spray process for more than about 20% of his time, averaged over the year, should be considered as employed in the process? You may think that 20% is too low and that a datum of 40% would be more reasonable; that is obviously up to you. In practice I should think that your Foremen would be able to say fairly readily which of their men would fall into the "regularly employed" category if given some datum of this kind as a guide.

Your lack of a central Medical Officer is perhaps your biggest difficulty and I do not quite know what to suggest. We are certainly not looking for extra work for Dr. Knox, but if it would be of help to you we could arrange for him to carry out the important initial examinations of Spray operators (as provided in paragraph 2 of our Instruction) and to examine the reports and X-rays relating to Spray labourers and other associated employees (in accordance with paragraph 3 of our Instruction). He could also check the periodic X-ray pictures (paragraph 4). On the other hand, some doubtful cases are bound to arise which would require personal examination by Dr. Knox, and he could not accept a commitment to travel about the country for this purpose; any such examinations would have to be done at Bolton or Rochdale. You may perhaps think it desirable to make some part-time arrangement with a number of local doctors, each covering a substantial area of your activities. If so, we would be happy to arrange for Dr. Knox to act as consultant, if desired, with a view to equalising standards.

It may be useful to mention that T.A.C. Co. Ltd. are proposing to arrange a scheme closely similar to the J.W.R. Ltd. scheme using their Medical Officers at Trafford Park and Erith to cover employees in the North and South respectively.

Finally, in regard to sub-licensees we do not feel that any compulsory arrangements can be made but we would suggest that the general principles of our arrangements should be notified to sub-licensees and they should be advised to organise medical supervision on similar lines.

I am sorry that this letter has been so long but I hope you may find it helpful.

Yours sincerely,