

Agenda

01 | Types of Monitoring Strategies Based Strategy

02 | What do we have?

03 | What do we need? – What is the Purpose of OH?

04 | Example of an Performance

05 | A “Comprehensive” Strategy

06 | Basic Characterisation

07 | Defining SEGs

08 | Defining Exposure Profiles

09 | Judgment of Acceptability of SEGs Exposure Profile

10 | Refining of SEGs Exposure Profile

11 | Validation and Continual Improvement

12 | Statistical Monitoring Strategy

13 | Conclusion

- **Specification Based Strategy:**

- Data collection, data analysis and data interpretation steps are specified in a regulation, standard or other guideline. Serves to “prove” compliance only.

- **Performance based Strategy:**

- To detect unacceptable exposure profiles with a high degree of confidence and is goal (exposure control) orientated.

- **OHS Act; Regulations for Hazardous Chemical Substances:**
 - prescribes NIOSH OESSM – highest exposed individual strategy;
 - 12 monthly for CL substances and 24 monthly for RL substances.

No statistical analyses or interpretation of data – purely for the purpose of “proving” compliance; truly **Specification based Strategy**

- **MHS Act; SAMOHP Codebook and COP Guideline Documents, e.g.:**

CAT.	PERSONAL EXPOSURE LEVEL	MINIMUM FREQUENCY
A	Exposures \geq the OEL or mixtures of exposures ≥ 1	Sample 5% of employees within a HEG on a 3 monthly basis with a minimum of 5 samples per HEG, whichever is the greater.
B	Exposures $\geq 50\%$ of the OEL and $<$ OEL or mixtures of exposures $\geq 0,5$ and < 1	Sample 5 % of employees within a HEG on a 6 Monthly basis with a minimum of 5 samples per HEG, whichever is the greater
C	Exposures $\geq 10\%$ of the OEL and $< 50\%$ of the OEL or mixtures of exposures $\geq 0,1$ and $< 0,5$	Sample 5 % of employees within a HEG on an annual basis with a minimum of 5 samples per HEG, whichever is the greater

- 90th Percentile HEG Classification
- Upper 95% Confidence Limit for comparison to the OEL [\(1\)](#)

- **MHS Act; Statistics.:**
 - Prescribes fixed minimum quantities and frequency of sampling – no certainty that it is sufficient (not tested, not considering data variability or statistical certainty)
 - Uses 95% UCL for compliance testing – not the best statistical parameter, as it looks at the mean exposure of the group; basically ignoring 50% of the exposures above the mean – what good is that?
 - Uses 90th percentile for “exposure profiling” – a poor statistical parameter, as it does not consider data variability/certainty (not very strict or robust)
 - Compliance orientated – not goal/control orientated

- **In both cases (OHS Act and MHS Act) we have Specification Based strategies:**
 - Entire Strategy Prescribed by legislation, as a “one size fits all approach”
 - Entirely intended for “testing” legal compliance
 - OESSM strategy will most certainly, regularly (almost 50% of the time) under-estimate true exposure levels
 - MHSA approach – cannot say with any certainty what it aims to achieve (other than collecting data)

- **The Purpose of OH is to Control – right?**
- **So why implement strategies that are purely intended for compliance testing?**
- **If the purpose of OH is to control, we should rather implement a Performance Based Strategy, with control as a goal**

- **AIHA – A Strategy for Assessing and Managing Occupational Exposure, 4th Ed.**
- **584 pages – published 2015; less than 2 months ago [\(2\)](#)**

- **Going beyond the traditional understanding of OH Practice - Confirm [\(3\)](#).**
- **In order for the Strategy “to work/to be effective”, everything must be done correctly right from the start – else it will have to be re-worked and refined a lot [\(4\)](#).**
- **The Aim or Goal of the Strategy is to accurately and confidently place every employee, exposed to every hazard in a confidently and accurately defined Control Category [\(5\)](#)**

- **What is meant by Comprehensive (6).**
- **Basic steps of the Comprehensive Strategy (7).**
- **Benefits of a Comprehensive Strategy/Approach (11)**

- **The Starting point of the strategy [\(12\)](#).**
- **Understanding who is exposed where, when (duration and frequencies), to what, why and from which sources and activities, and potential health effects caused by the exposure/s.**
- **In our terms – gathering workplace and exposed worker information as for a detailed Risk Assessment [\(13\)](#)**

- Part of the exposure assessment, is to define SEGs
- The principles of a SEG [\(8\)](#) – an extremely crucial step; if this is done incorrectly or too crudely, the rest of the strategy will not work, and trying to apply it will frustrate you immensely.
- Logic process:
 - Divide workplace into Processes
 - Sub-divide Processes into Jobs
 - Sub-divide Jobs into Tasks
 - Persons performing same/similar task, exposed to same hazard/same source, for similar frequency and duration = SEG

- Award an exposure band, relative to the OEL, for each hazard for each SEG [\(9\)](#)
- Lots of effort to ensure that “all” employees in a SEG, falls into only one Exposure Category/band , with very high statistical confidence [\(14\)](#)
- Done through observation and professional Judgment (historical/current approach) – found to generally underestimate exposure category by at least one level (same accuracy as random chance)
- Or done purely through analyses of historic data, or combination of data analysis and professional judgment.

- **Profiling of SEG from historic data:**
 - As a start, the 95th percentile must be less than an exposure category limit, and the GSD must be less than 3 – be wary of Critical SEGs [\(18\)](#)
- **Profiling of SEG from new/baseline monitoring data, or surrogate data:**
 - Collected over short period of time (6 to 10 samples) – does not include much day-to-day, inter- or intra- employee variation; likely to underestimate exposure
- **Profiling of SEG from Qualitative Modeling:**
 - Found to be even more accurate than sampling data, as it considers intra-SEG exposure variables.

- **Profiling of SEG from Modeling:**
 - Check-list based, well documented systematic approach (meaning anyone can re-trace the steps at any time in future) – based on mathematical algorithms
 - Excel spreadsheet based freeware models, e.g. IH Mod [\(15\)](#) , Monte Carlo Simulation and others [\(16\)](#)
 - As well as NIOSH Control Banding, Stoffenmanager, Industrial Hygiene Exposure Scenario Tool (IHEST) freeware, etc.

- Making sure that you have correctly (with sufficient certainty) placed your SEG in a particular exposure band [\(10\)](#)
- Uncertainty [\(17\)](#)
- This is where most time and effort will be spent – else your monitoring strategy will be meaningless; monitoring data will be interpreted incorrectly and provide you with false information.

- Improving professional judgment, in setting SEG Exposure profiles:
 - Refining confidence with exposure data – use 95%UCL of 95th percentile, to focus on the upper tail of exposure profile [\(19\)](#).
 - Introduce BDA (Bayesian Decision Analysis) – combining monitoring data and professional judgment, to improve certainty [\(20\)](#)
 - Applying “Analysis of Variance” (ANOVA) statistical tool to refine Critical SEGs

- **Continual refinement of Exposure Profiling:**
 - **Testing whether your data set conforms to a normal, or log-normal distribution to ensure that the correct type of statistics is applied – by means of W-Test**
 - **Identify outliers and other employees/exposures that should rather be assigned to another SEG, by conducting “probability plotting” statistical techniques**

- At last, now you are confident that your SEGs are correctly identified and their exposures profiles correctly categorized (with Statistical confidence) – why?:
 - To reduce data variability [\(21\)](#) – ensure effective sampling
 - And highly variable data will result in SEGs having very high UCL95%,95%, meaning they will more likely (and unnecessarily) be classified in Control Category 4

True Statistical, representative sampling

- **How many samples?:**
 - Calculated on the basis to ensure that you do not incur excessive false positive or false negative decisions [\(22\)](#)
 - Very, very Randomly selected

- **How Frequent should one Sample?:**
 - Dependent on SEG's Exposure Category [\(23\)](#)
 - Higher frequency of sampling for Higher Risk SEGs (i.e. exposed to Carcinogens), Critical SEGs.
 - Be logic

- **Start moving away from compliance based strategies and start practicing what OH practice is meant to be – To Control.**
- **Working under the MHSA, you have a basic strategy framework and ample historic data, and can easily gradually convert what you have to a proper Performance Based Strategy.**

THANK YOU

Kind Regards

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