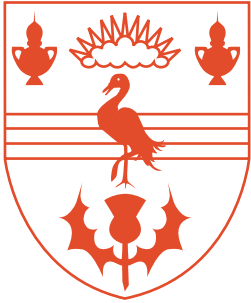


# Environmental Health *Scotland*

The Journal of the Royal Environmental Health Institute of Scotland

Vol 15 - Number 4 Winter 2003





# The Royal Environmental Health Institute of Scotland

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# Environmental Health Scotland

## Volume 15, Number 4 Winter 2003

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Photograph by Ian Britton.*

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## THE PRESIDENT'S VIEW



I find myself in the almost unique position of being elected President of REHIS for a second time, previously being fortunate enough to be President in 1993. I say almost unique, in that a few of the other Past Presidents of REHIS had served with distinction as Presidents of one or other of the two professional bodies which came together in 1983 to form our Institute. I feel honoured to be given this opportunity again and hopefully the experiences I have enjoyed within REHIS over the last 20 years will help me succeed in moving the Institute still further forward within the field of public health in Scotland.

When REHIS was formed from its predecessor organisations 20 years ago, who would have imagined the changes that have occurred in the intervening period? The Royal Sanitary Association of Scotland (RSAS) had a very broad church of membership whereas the Scottish Institute of Environmental Health had a membership restricted to Environmental Health Officers. The newly incorporated organisation in 1983 retained the diversity of membership from the RSAS and this continues today. However, the areas of public health in which the Institute's members operate have changed dramatically. Virtually all the members in 1983 were employed in the public sector – Local Authority EHOs, Meat Inspectors, Medical Officers, etc. Now a sizable proportion of our members are employed outwith the public sector and those within it are operating within larger units where Environmental Health is not necessarily the driving force.

These changes should not be seen as retrograde, but rather as challenges to make us examine ourselves. No group, professional or otherwise, has any right to assume its place in society. When change occurs it needs to be seen as an opportunity for improvement. I have always held the firm belief that Environmental Health could be perceived to be too narrow - tell that to students preparing for their Professional Interviews and I think you might not find many agreeing with this view! I perceive all the members of REHIS as being Environmental Health professionals working in the field of public health. The common cause should be to strive as individuals to play our part in the improvement of public health in Scotland with the cumulative efforts being greater than the sum of the individual parts. No one member is more important than any other in this respect and it would be a sad day for public health in general, and REHIS in particular, if we lost sight of this concept.

REHIS has achieved so much since 1983. We are now incorporated by Royal Charter, we are financially stable enough to permit us to fulfil all the aims of our Charter, and we are moving towards a time when suitably qualified and experienced members of the Institute will hopefully be able to achieve the accolade of Chartered Environmental Health Officer.

In 12 months' time I hope to be able to report that REHIS has once more moved forward in its achievements and that it has again played a vital role in the improvement of public health for the people of Scotland.

# CURRENT PERSPECTIVES ON BSE AND CJD

by Professor James W Ironside, National CJD Surveillance Unit, University of Edinburgh

## Introduction

Bovine spongiform encephalopathy (BSE) and Creutzfeldt-Jakob Disease (CJD) belong to a group of disorders known as the transmissible spongiform encephalopathies (TSE) or prion diseases. Since the identification of BSE in the mid 1980s and the subsequent identification of variant CJD a decade later, there has been enormous medical, scientific, political and public interest in this hitherto obscure group of neurological conditions. The impact of these diseases on public and animal health, farming, politics and public trust in terms of food safety has been enormous, yet some fundamental aspects of these disorders remain poorly understood. This article attempts to review the current status of BSE and CJD in the UK and to outline the uncertainties concerning future predications of cases of variant CJD.

Since the identification of the prion protein (PrP) in the 1980s, there has been an enormous expansion of research in this field. The normal protein is highly conserved throughout many species and is expressed in many tissues, but in normal animals and in humans the highest levels are found in neurones within the central nervous system. In contrast, the abnormal protein is only identified in the central nervous system in individuals suffering from a prion disease. It has an altered conformation, with an increased beta-pleated sheet structure, which allows it to aggregate as amyloid rods and plaques in the brain (Figure 1). This change in conformation also renders the protein more stable, and it is relatively resistant to degradation in comparison with the normal version of the protein. Likewise, the infectious agent (or prion) is remarkably resistant to most forms of decontamination; infectivity is not

<b>a. Human prion diseases:</b>		<b>b. Animal prion diseases:</b>	
Idiopathic:	Sporadic Creutzfeldt-Jakob disease Sporadic fatal insomnia	Scrapie:	sheep and goats (worldwide)
Inherited:	Familial Creutzfeldt-Jakob disease Gerstmann-Sträussler-Scheinker syndrome Fatal familial insomnia	Transmissible mink encephalopathy:	farmed mink (outbreaks in N America)
Acquired:	Human source:	Iatrogenic Creutzfeldt-Jakob disease Kuru	BSE: cattle (predominantly in UK, but spreading in Europe)
	Bovine source:	Variant Creutzfeldt-Jakob disease	BSE-related diseases: antelopes, domestic and wild cats (predominantly in UK)
			Chronic wasting disease: deer and elk (N America)

Table 1. Classification of human and animal prion diseases.

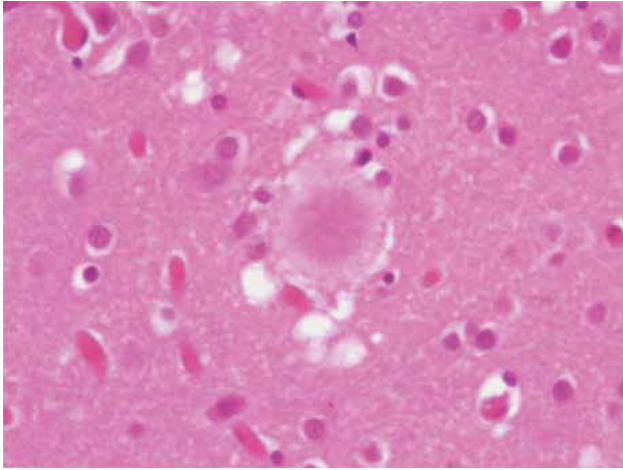
## What is a Prion?

Prion diseases occur in both animals and man (Table 1). The transmissible agent responsible for these disorders has been the subject of intensive research over many decades, since the first experimental transmission of scrapie in the 1930s. The transmissible agent was found to be very small (sub-viral) in size, and accumulates at high levels in the central nervous system of infected hosts. Despite intensive investigations, no nucleic acid (DNA or RNA) component has ever been identified, and there is increasing support for the prion hypothesis which states that the transmissible agent is composed solely of a modified host-encoded protein, the prion protein.

completely abolished by fixation in formaldehyde or glutaraldehyde, and infectivity is resistant to the action of enzymes such as DNAase and RNAase which inactivate many viruses and bacteria. Infectivity is also resistant to the effects of ionising radiation.

However, many questions concerning the prion hypothesis await further evaluation. In particular, experimental transmission studies have demonstrated that different strains of the infectious agent in scrapie can be identified, based on the biological properties of the agent when transmitted into mice. In the apparent absence of an informational molecule such as DNA or RNA, it is difficult to explain the existence of these strains, but recent suggestions have been made to

accommodate their existence within the prion theory, where different strains can be explained by different conformational variations in the structure of the abnormal protein.



*Figure 1. A microscopic image from the brain of a patient who died from variant CJD, showing a rounded amyloid plaque (centre), composed of abnormal prion protein. This pattern of accumulation is characteristic of variant CJD.*

### **Bovine Spongiform Encephalopathy**

Bovine spongiform encephalopathy (BSE) was identified as a novel disease in cattle in the UK in the mid 1980s. This disorder spread as an epizootic in predominantly dairy cattle in the UK, reaching a peak in 1992-1993 with an incidence of around 3,500 cases per month. Early epidemiological studies indicated that the vector for disease transmission was meat and bonemeal animal feed, which apparently had become contaminated with a prion agent. The source of this contamination was not known and there are several theoretical possibilities, including the earlier occurrence of BSE as a sporadic disorder in cattle which was then passed to other cattle via contaminated ruminant feed, or the possible transmission of a previously unidentified strain of sheep scrapie via the rendering process to bovines and other species. It is also possible that changes within the rendering process in the late 1970s and early 1980s may have inadvertently allowed the persistence of prion infectivity in the animal feed product (reduction of temperature and cessation of a solvent extraction process). However, this possibility cannot be formally proven.

As well as transmitting to many tens of thousands of cattle within the UK, BSE also transmitted to other species which were exposed to the contaminated feed, including a range of antelopes in zoos, domestic cats (presumably via commercial cat food) and to

wild cats in zoos which have been exposed to BSE-infected carcasses. All of these occurrences implicated the importance of the oral route of transmission of BSE and the ability of this new disease to cross the 'species barrier'. In contrast, scrapie appears to be confined to sheep and goats, unless experimentally transmitted in the laboratory to other species. The successful implementation of the feed ban controls in the UK have eventually allowed the BSE epizootic to decline, although the disorder has not yet been completely eradicated. Of particular current concern is the identification of cases of BSE in animals born after 1996 (over 50 of which have now been identified). These cases in animals born since the reinforced food ban in 1996 have been reviewed by the scientific steering committee of the European Commission who have suggested a number of possible explanations:

- Exposure to feed carried over from before 1996, either accidentally or deliberately.
- Maternal transmission of BSE.
- Routes of transmission which have not yet been identified including:
  1. Environmental contamination.
  2. Contamination of imported feed ingredients to the UK.
  3. Use of tallow-derived calf milk replacer.

The source of BSE exposure to these cattle has not yet been identified and until this situation has been clarified and the appropriate measures taken to prevent further exposure, it is uncertain as to when BSE will be eradicated from the UK.

BSE has spread to other countries both in Europe and further afield, including Japan and Canada. The identification of BSE cases has now been enhanced by the development of rapid diagnostic tests to identify the abnormal form of the prion protein in brain stem tissue obtained from animals slaughtered within abattoirs. This form of rapid testing allowed contaminated carcasses to be removed from the food chain, but it is not evident that this test will identify all potentially infected animals because of the sensitivity of the various assays employed, and the fact that infectivity may not be detectable in the brain stem in the early part of the incubation period in animals which have already been exposed to BSE. Because of these uncertainties, it is premature to conclude that BSE is no longer a European problem and continuing efforts to prevent recycling of ruminant proteins in animal feed are essential for disease control.

## Human Prion Diseases

Human prion diseases occur in three main groups (Table 1), the commonest of which is the sporadic form of Creutzfeldt-Jakob disease (sCJD). sCJD occurs as a worldwide disorder, with an instance of around 1-1.5 per million per annum in all countries which have been studied. The cause of sCJD is unknown, but a number of risk factors have been identified, including homozygosity at codon 129 in the PrP gene (Table 2). Epidemiological studies have revealed no association with scrapie, which may have entered the human food chain through the presence of lymphoid or central nervous system tissues in sheep and lamb meat products. Recent case control studies have suggested that there is a higher frequency of previous surgical procedures in patients with sCJD than in control. The significance of this is uncertain and the findings require to be interpreted with caution, but it suggests that perhaps some of these cases result from an environmental exposure to the infectious agent.

months have been observed following the use of contaminated neurosurgical instruments. In contrast, peripheral inoculation of human pituitary derived hormones can result in much longer incubations of 30 years and beyond.

### Variant CJD

Surveillance of all forms of Creutzfeldt-Jakob disease was commenced in the UK in 1990 as the result of the BSE epidemic. In 1996, the National CJD Surveillance Unit in Edinburgh reported the occurrence of a new form of human prion disease, now known as variant CJD (vCJD). vCJD differs from sCJD in that it affects younger patients, with a relatively longer clinical illness with distinct features including the occurrence of psychiatric abnormalities around the disease onset (see Table 3). So far, all cases of vCJD have occurred in individuals who are methionine homozygotes at codon 129 in the PrP gene (Table 2). It is uncertain yet as to whether vCJD will occur in the other two genetic subgroups within the population; if so, this will require

Codon 129 polymorphism	Methionine/methionine	methionine/valine	valine/valine
Normal	37%	51%	12%
Sporadic CJD	71%	15%	14%
Variant CJD	100%	-	-

Table 2. Codon 129 prion protein gene polymorphisms in CJD and normal Caucasian population.

The second commonest group of human prion diseases are the inherited disorders, which occur as autosomal dominant diseases associated with insertions and mutations within the human PrP gene. The third group of disorders represents the acquired human prion diseases, including Kuru, a rare disease transmitted by ritualistic endocannibalism in the Fore tribe in Papua New Guinea, and iatrogenic Creutzfeldt-Jakob Disease, which has been transmitted from person to person by contaminated neurosurgical instruments, and by tissue implants and tissue-derived products including corneal grafts, dura mater grafts and injection of human pituitary-derived growth hormone and gonadotrophins. Study of these acquired diseases has indicated that transmission of infectivity into or around the central nervous system in humans is the most efficient, consistent with animal experiments, where incubation periods of around 18

the revision of current estimates of likely future numbers of cases. These estimates have been reduced recently as the rate of increase of vCJD cases has declined in 2003. However, because of the uncertainties to the incubation period of the disease and the extent of human exposure, as well as the likelihood that the disease may emerge in other genetic subgroups, it is not possible to estimate with certainty the likely numbers of future vCJD cases in the UK.

The relationship between vCJD and BSE has been confirmed in a number of independent scientific laboratories, which have studied the characteristics of the transmissible agents derived from both disorders. Experiments to both inbred and transgenic mice have identified that the strain of agent causing BSE is identical to the strain found in vCJD. These strain characteristics, however, differ from those found in cases of sporadic

CJD and in scrapie. Therefore, it appears vCJD is the first recorded example of human transmission of an animal prion disease, and it should be recalled that BSE has also spread to other non-bovine species including antelopes and a range of cats.

	sCJD	vCJD
Mean age at death (y)	66	29
Duration of illness (m)	4	13
Psychiatric features	rare	common
Rapid dementia	common	rare
Sensory symptoms	rare	common
Movement disorders	common	common

Table 3. Comparison of clinical features of sCJD and vCJD.

vCJD also differs from sCJD in that infectivity is present outside the central nervous system, in lymphoid tissues including the tonsils (Figure 2), lymph nodes, spleen and gut-associated lymphoid tissue (eg, in the appendix). This has given rise to concerns that vCJD may be transmitted by surgical instruments used on these tissues, since the infectivity cannot be totally removed by conventional hospital decontamination procedures. Tonsillectomy is a relatively common surgical procedure and in some areas of the UK single-use instruments have been used to perform these procedures in order to reduce the risk of secondary

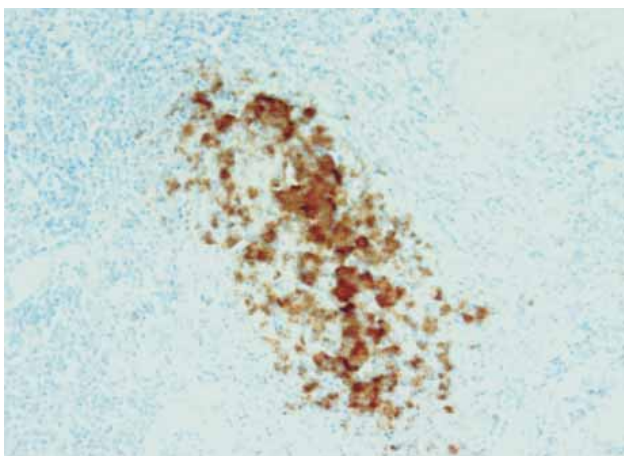


Figure 2. A microscopic image from the tonsil of a patient who died from variant CJD. The tonsil is stained to show accumulation of abnormal prion protein (brown). The presence of prion infectivity in the tonsil in variant CJD has given rise to concerns over accidental transmission of the disease by contaminated surgical instruments used in tonsillectomy.

(iatrogenic) transmission of vCJD. The presence of vCJD infectivity in lymphoid tissues has also given rise to concerns that infectivity may be present in blood, although there is no direct evidence for this. However, the national blood services in the UK have instituted a number of precautionary measures, which are designed to reduce the likelihood of transmission of vCJD through blood and blood products. These measures include leucodepletion, where blood units are filtered to remove the white blood cells (which are likely to carry highest levels of infectivity in blood if present), and the sourcing of plasma products outside the UK. At present, there are no means of identifying individuals who have been exposed to or who are incubating a BSE-acquired infection, but there is a substantial amount of research in progress to try and develop sensitive techniques to detect abnormal PrP in blood, or perhaps in other body fluids such as urine.

There are no currently effective means of treating human prion diseases. A number of compounds have been shown to influence the incubation period of these diseases in animals, but their efficacy in humans is unknown. However, there is likely to be a clinical trial established in the UK of a compound called Quinacrine, an anti-malarial agent that has demonstrated *in vitro* action against prion agents and is currently the subject of a clinical trial in the USA. The results of this study will be awaited with great interest.

## Conclusions

Prion diseases are unique transmissible disorders which propose a large number of scientific challenges to our understanding of concepts of disease susceptibility and transmission. Their unique biological characteristics make it particularly difficult to devise strategies for early diagnosis and detection, and for effective treatment. However, it is anticipated that there will be major developments over the next few years in these fields, which may also be accompanied by improvements in standards of decontamination for prion infectivity, particularly in the human healthcare setting. Particular vigilance is acquired to identify other new and emerging prion diseases, and in this context the continuing spread of the prion disorder known as chronic wasting disease in wild and captive deer and elk in North America is of particular concern.

## Acknowledgements

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## Selected References

1. Anderson R.M., Donnelly C.A., Ferguson N.M., et al., Transmission dynamics and epidemiology of BSE in British cattle. *Nature* 1996; 382:779-88.
2. Andrews N.J., Farrington C.P., Ward H.J., et al., Deaths from variant Creutzfeldt-Jakob disease in the UK. *Lancet* 2003; 361: 751-2.
3. Bruce M.E., Will R.G., Ironside J.W., et al., Transmissions to mice indicate that "new variant" CJD is caused by the BSE agent. *Nature* 1997;389:498-501.
4. Collinge J., Sidle K.C.L., Meads J., et al., Molecular analysis of prion strain variation and the aetiology of "new variant" CJD. *Nature* 1996;383:685-90.
5. DEFRA Home Page. [www.defra.gov.uk](http://www.defra.gov.uk)
6. Hill A.F., Butterworth R.J., Joiner S., et al., Investigation of variant Creutzfeldt-Jakob disease and other human prion diseases with tonsil biopsy samples. *Lancet* 1999;353:183-9.
7. Hilton D.A., Ghani A.C., Conyers L., et al., Accumulation of prion protein in tonsil and appendix: review of tissue samples. *Brit Med J* 2002; 325: 633-4.
8. Hunter N., Foster J., Chong A., et al., Transmission of prion diseases by blood transfusion. *J Gen Virol* 2002;83:2897-905.
9. Ironside J.W., Prion diseases in man. *J Pathol* 1998;186:227-34.
10. Ironside J.W., Head M.W., Bell J.E., et al., Laboratory diagnosis of variant Creutzfeldt-Jakob disease. *Histopathology* 2000;37:1-9.
11. Ironside J.W., McCardle L., Horsburgh A., et al., Pathological diagnosis of variant Creutzfeldt-Jakob disease. *APMIS* 2002; 11: 79-87.
12. National Creutzfeldt-Jakob Disease Surveillance Unit. [www.cjd.ed.ac.uk](http://www.cjd.ed.ac.uk).
13. Prusiner SB. Prions. *Proc Natl Acad Sci USA* 1998; 95: 133673-83.
14. Scott M.R., Will R., Ironside J., et al., Compelling transgenic evidence for transmission of bovine spongiform encephalopathy prions to humans. *Proc Natl Acad Sci USA* 1999;96:15137-42.
15. Turner M.L., Ironside J.W., New-variant Creutzfeldt-Jakob disease: the risk of transmission by blood transfusion. *Blood Rev* 1998;12:255-68.
16. Wells G.A., Scott A.C., Johnson C.T., et al., A novel progressive spongiform encephalopathy in cattle. *Vet Rec* 1987;121:419-20.
17. Wilesmith J.W., Wells G.A., Cranwell M.P., Ryan J.B., Bovine spongiform encephalopathy: epidemiological studies. *Vet Rec* 1988;123:638-44.
18. Will R.G., Ironside J.W., Zeidler M., et al., A new variant of Creutzfeldt-Jakob disease in the UK. *Lancet* 1996;347:921-5.
19. Williams E.S., Miller M.W., Transmissible spongiform encephalopathies in non-domestic animals: origin, transmission and risk factors. *Rev Sci Tech* 2003; 22: 145-56.

*This article is based on a paper presented at the 21st Annual Conference on Environmental Health, Nairn, 27th May 2003. Editor.*

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## SEAGULL NUISANCE

The Deputy Chief Medical Officer, Dr Andrew Fraser, is conducting research into the potential for harm and the public health threat posed, in Scotland, by seagulls. He would be grateful for any information which REHIS members could provide about the frequency, type and location of incidents implicating seagulls as a nuisance or potential public health threat.

This will assist Dr Fraser to estimate the scale of the problem, answer some of the presently unanswered questions, and devise a plan to address public anxiety.

Members who have information for Dr Fraser can forward this to the REHIS office or send it directly to him at St Andrew's House, Regent Road, Edinburgh, EH1 3DG.

# OUTBREAK OF CRYPTOSPORIDIUM IN A PUBLIC WATER SUPPLY IN COUNTY WESTMEATH, IRELAND

by Marie Gillooly, Principal Environmental Health Officer, Midland Health Board, Ireland

## Introduction

In April 2002, the first outbreak of Cryptosporidium associated with a public water supply in the Republic of Ireland occurred in Co. Westmeath.

The supply of public drinking water for Mullingar town and the central area of Co. Westmeath is taken from Lough Owel – a 3,000 acre lake – north of Mullingar. The lake is described as a single basin and is situated in the middle of carboniferous limestone deposits. It is primarily springfed through Karst fissures in the underlying limestone.

There are approximately 89 farms in the catchment area of the lake and the primary use of land in the catchment area is grassland farming. This is a high amenity area and the residential dwellings surrounding the lake are primarily served by septic tanks.

The water treatment system consisted of basic gross solid removal and disinfection. The system was not filtered.

The first case of Cryptosporidium, linked to the outbreak, was admitted to the Midland Regional Hospital, Mullingar on 23 April 2002 and was found to be positive for Cryptosporidium infection on faecal sampling.

On Friday 3 May, the Friday of the May Bank Holiday weekend, the first Outbreak Control Team meeting was held by the Midland Health Board in relation to this outbreak. It was decided to recommend that Westmeath County Council issue a Boil Water Notice in respect of this water supply for the following reasons:

## Epidemiological evidence

There were eight cases of Cryptosporidium confirmed since 1 May, residing in the water distribution network.

## Water treatment

As this was an unfiltered supply there was no mechanism in place to remove Cryptosporidium from the water supply.

## Nature of source

The water supply is a vulnerable source of water to contamination with Cryptosporidium; it has a 13 mile shoreline surrounded by farms and domestic dwellings with single site sewerage treatment systems. This, coupled with the lack of a filtration system, meant the lake was a potential source of infection.

## The population

The water supply services 25,000 people including four hospitals, four nursing homes, 331 food premises and 39 pre-school facilities and schools.

At the initial meeting of officials from the Midland Health Board and Westmeath County Council an Incident Management Team was established. A three pronged action plan was agreed as follows:

1. Epidemiology
2. Water Monitoring
3. Risk Assessment

At this and at all subsequent meetings, the agenda covered these three main areas.

## Implementing the Boil Water Notice

The immediate task facing the County Council and the Health Board was to establish a means of communicating the contents of the Boil Water Notice to the 25,000 customers – comprising of approximately 11,000 homes and business premises – who would be affected by it. A large number of the customers affected were based in rural areas within a 20 mile radius of Mullingar town.

## Action taken by the Midland Health Board

It was considered of the utmost urgency to inform the following groups: the food industry, general practitioners, pharmacists, dentists, school principals, and hospital consultants, about the contents of the Boil Water Notice. Information leaflets were drafted in respect of all food premises – four hospitals, four nursing homes, 331 food premises and 39 pre-schools, and each individual premises was visited by an EHO on Friday 3 May, to ensure the Boil Water Notice reached these premises rapidly and to address any individual queries that proprietors might have. A memo was prepared for all general practitioners, pharmacists, dentists and school principals who were operating in the area. In addition, telephone contact was made with all GP practices, dentists and pharmacists informing them of the situation and giving advice regarding use of the water in their practices. Memos were sent to all hospital consultants in the Midland Regional Hospitals at Mullingar, Tullamore and Portlaoise and the Senior Infection Control Sister for the hospitals was briefed on the situation. The Senior Laboratory Technologist in the

Midland Regional Hospital at Mullingar was contacted to inform him of the situation and the need for enhanced surveillance. The Microbiology laboratory in the Midland Regional Hospital at Tullamore was contacted and asked to report any cases of *Cryptosporidium* to the Department of Public Health immediately.

### Action taken by Westmeath County Council

It was the stated policy of Westmeath County Council, from the outset, to provide the public with the most complete and up to date information at all times. As the Boil Water Notice came in to being during the run up to an election, local County Councillors were notified and provided with details. Local radio stations were requested to broadcast the existence of a Boil Water Notice every hour on the hour, for customers served by the Lough Owel water supply, and also to read out the areas affected. This broadcast was in place at 4pm on 3 May.

A freephone number for information on the Boil Water Notice for the public was also made available.

National radio and TV stations were notified and a news item was broadcast on the evening news, both on radio and TV stations on 3 May.

National newspapers and the local newspapers were contacted and all national newspapers circulating in the area published an article on the outbreak. The Westmeath County Council website was immediately updated, informing customers of the Boil Water Notice and why the notice was in place. This website was continuously updated giving the public information on the results of the daily tests being carried out on the water and what actions were being put in place to deal with the outbreak. The local Chamber of Commerce was informed and they, in turn, e-mailed all their members. The council also notified local abattoirs and cutting plants.

Notices were hand delivered to public houses, churches and schools. 11,000 leaflets were prepared and posted out to customers.

### Monitoring the outbreak

As earlier indicated, an Incident Management Team was established on 3 May 2002; it comprised the Principal EHO, the Senior EHO, the Specialist in Public Health and various representatives of the local authority

including two Directors of Services. The team met on a weekly basis.

The Specialist in Public Health reported on the epidemiological investigation. 26 cases, 50% male and 50% female, were diagnosed in the catchment area of the lake. The age ranged from 11 months to 38 years, 75% of them were under five years old.

The Environmental Health Department and officials from Sanitary Services, Westmeath County Council, undertook daily monitoring of the water source in order to establish a profile of Lough Owel. Once this profile of the source was established, concentrated water samples were taken throughout the supply at representative sites in order to establish a profile of the entire network. Samples were also taken to test for *Clostridium perfringens*, an indicator organism for *Cryptosporidium*. Results were assessed at each weekly incident management meeting and a weekly programme for water sampling was drawn up in line with recommendations from the Health Board. Two types of water samples were taken for analysis: grab samples and concentrated samples. The results of all tests taken were posted on the council's website immediately on receipt.

The Environmental Section of the County Council carried out a Risk Assessment and identified possible sources of pollution around the lake, and issued Section 12 notices under the Water Pollution Act of 1977, where appropriate. Discussions were initiated with the farming community with a view to having the catchment area of the lake managed as a drinking water reservoir. The Environmental Health Department contacted the meteorological office for rainfall statistics and levels for the period from 18 March 2002 to 30 April 2002. Looking at the information provided by the council on possible sources of contamination and the rainfall statistics, it was concluded that heavy rainfall may have facilitated the ingress of oocysts into the water supply.

The County Council's Sanitary Services Section reported on the progress of negotiations with the Department of the Environment and Local Government for the provision of a temporary filtration system and a permanent filtration system. The Department gave approval for the immediate planning of a permanent filtration system, which had been scheduled to start in 2004. A consultant was appointed to fast track the procurement of the temporary filtration system as an emergency measure.

Two swimming pools were located within the catchment area and both voluntarily closed down once the Boil Water Notice was issued. Subsequently, however, queries arose in relation to the reopening with regard to public health. Letters were sent to both, addressing the following three management areas:

- Operational control and management
- Swimmer hygiene practices
- Education

The document '*Environmental Health Standards for Swimming Pools, Spa Pools, Hydrotherapy Pools and Other Multi-user Pools*', was an invaluable reference source in relation to the reopening of both pools.

### Rescinding the Boil Water Notice

Usually Cryptosporidium outbreaks linked to a water supply are due to a treatment deficiency, which can be rectified. However in this situation Lough Owel was an unfiltered water supply. Therefore, criteria had to be developed to remove the Boil Water Notice in the absence of a filtration system.

Ms Marie Gillooly, Principal EHO, Ms Mari Greene, Senior EHO, and Dr Phil Jennings, Specialist in Public Health Medicine established the following criteria to rescind the Boil Water Notice in this particular outbreak situation. This decision was based on epidemiological evidence and environmental evidence, including water monitoring and continued risk assessment.

### Epidemiological evidence

From an epidemiological perspective, it was important that sufficient time had elapsed which would allow the Health Board to say with confidence that any new cases arising would be linked with starting to drink water again and not to the period before the issuing of the Boil Water Notice.

This took into account factors such as potential delay in becoming aware of the Boil Water Notice, the incubation period of the illness, the duration of the illness, the length of time required for the faecal sample to be examined and the result conveyed to the Department of Public Health. Taking all of the above into account it was felt that a minimum of a five week period was required for the Boil Water Notice to be in place.

### Environmental evidence

#### • *Source Water Quality*

It was decided that a minimum of seven clear concentrated samples, taken at the intake of the public supply on Lough Owel on seven consecutive days, should be obtained prior to removing the Boil Water Notice. Between the 10 June 2002 and 17 June 2002, eight clear consecutive samples were obtained.

#### • *Treated/Network Water Quality*

It was decided to establish a baseline profile in respect of the distribution network, in addition to the source. From 5 June 2002 to 20 June 2002, concentrated samples were taken from numerous sites on the distribution network. In addition, samples were taken and tested for *Clostridium perfringens*, which is an indicator organism for Cryptosporidium on the network. The results showed that for the two weeks prior to the rescinding of the Boil Water Notice, samples for Cryptosporidium were clear and in relation to sulphite reducing Clostridium, the samples were satisfactory.

#### • *Continuing Water Monitoring*

It was decided that Westmeath County Council should install a system for sampling continuously for Cryptosporidium over a 24 hour period<sup>1</sup> at the source, Lough Owel. However, until this system was installed at the source, it continued to be monitored daily by means of concentrated sampling.

Concentrated samples were taken on the network by Westmeath County Council at various representative sites, in addition to the samples that were taken following the implementation of the programme for cleaning/flushing of water mains and reservoirs (see later). Samples for *Clostridium perfringens* were taken for two days each week for a period of one month at four representative sites on the network by the Environmental Health Department. The above sampling programme was subject to ongoing review taking note of peak risk periods for Cryptosporidium, eg, Autumn, and on the epidemiological evidence once the Boil Water Notice was rescinded.

- ***Programme for Cleaning/Flushing of Water Mains and Reservoirs***

A 16 week time period was involved in the total cleaning and flushing of the entire system. It was not reasonable, in light of all the other surrounding evidence, to leave the Boil Water Notice in place for an additional 16 weeks to complete this cleaning and flushing programme. In light of the following factors it was decided that the program could be implemented after the Boil Water Notice had been lifted.

- The result of the water samples on the network for the previous two weeks were clear, hence, there was clean water flushing through the system for a minimum of two weeks.
- A specialist company was employed to complete the work of cleaning and flushing. In addition, the actual cleaning process would not allow accidental contamination of the supply.
- Sludge was disposed of in a satisfactory manner to designated sites where subsequent contamination of water courses was avoided.
- The County Council agreed to monitor and sample the water, once works were completed on the network, to ensure that the water leaving the particular reservoir was satisfactory.

### **Risk assessment**

An ongoing risk assessment plan was drawn up and implemented by Westmeath County Council.

### **The process of rescinding the Boil Water Notice**

- ***The public***

A letter was drawn up and approved by the Midland Health Board and Westmeath County Council in respect of lifting the Boil Water Notice and containing advice to be given to the public.

- ***Food premises, health care professionals and schools***

Letters were drawn up and sent to the proprietors of all food premises, including hospitals, nursing homes, pre-school facilities and schools. Letters regarding the rescinding of the Boil Water Notice

were also sent to GPs, consultants, dentists, pharmacists and schools. The Infection Control Nurse in the hospital was contacted to advise her of the rescinding of the Boil Water Notice. A letter notifying the public that the Boil Water Notice was being rescinded was also sent to the press.

### **Action plan for the reissue of a Boil Water Notice**

Westmeath County Council drafted an action plan for the reissue of a Boil Water Notice, should the situation warrant it, once the notice had been rescinded.

### **Conclusions**

1. There was a sharp fall off of cases of *Cryptosporidium* after the Boil Water Notice was issued, once the incubation period for *Cryptosporidium* had passed. There was only one confirmed case with the date of onset that lies outside the incubation period after the Boil Water Notice was issued. Therefore, it is felt that issuing the Boil Water Notice was effective in curtailing the outbreak and reducing subsequent cases.
2. The prompt testing of the water supply by the Environmental Health Department was important in the overall management of this outbreak. The water was tested, in this instance, as the EHOs knew that Lough Owel was an unfiltered water supply and therefore could be contaminated with *Cryptosporidium*.
3. Two possible sources of contamination of the water supply with *Cryptosporidium* were identified by Westmeath County Council. Heavy rainfall may have facilitated ingress of the oocysts from the land to the water supply.
4. It is generally recommended that criteria should be in place for the rescinding of a Boil Water Notice before the issuing of same. However, in this instance, it was considered to be of the utmost importance to issue the notice in order to protect public health even though the criteria for rescinding the notice was not in place. The value of an annual monitoring program for an indicator organism, ie, *Clostridium perfringens* in a water system that has no filtration unit must be questioned. Random spot sampling is unlikely to be effective for operational monitoring.

5. This outbreak highlights the need for a comprehensive surveillance and notification system of infectious diseases to facilitate early detection of an outbreak. This process was instrumental in the early detection of this outbreak of *Cryptosporidium*.
6. The Environmental Health Officers' knowledge of the water system was crucial in the initial stages of the outbreak.
7. This is the first reported outbreak in the Republic of Ireland of Cryptosporidiosis associated with a public water supply. Routine water monitoring does not include testing for *Cryptosporidium* or for the indicator organism, *Clostridium perfringens*.
8. As each outbreak situation is different, it would be extremely difficult to set criteria at national level for the implementation or rescinding of a Boil Water Notice.
9. A good working relationship between the Health Board and the County Council, particularly the Environmental Health Department and the Sanitary Services Section of the County Council is essential in an outbreak scenario. Links should be established before an outbreak occurs.
10. The value of using epidemiological evidence, even in the absence of microbiological evidence, in identifying and managing an outbreak should be highlighted for all personnel involved.
11. Boil Water Notices should be clear in their instructions. They should indicate that water need only be brought to the boil as in an electric kettle and that water should be allowed to cool before use. A section on the prevention of accidental scalds should also be included.

### Recommendations

1. *Cryptosporidium* should be included in the list of notifiable diseases.
2. Laboratory policy on the testing of stool specimens for *Cryptosporidium* should be standardised.
3. Water should be tested for *Cryptosporidium* where two or more cases of *Cryptosporidium* have been confirmed which are linked to the same water supply and where no other risk factors have been identified. Concentrated filtered water samples should be taken.
4. The County Council should systematically assess the potential risk of ground water contamination by *Cryptosporidium*, particularly in unfiltered water supplies by application of a tripartite approach, which assesses source, catchment and hydrogeological factors.
5. In relation to a final treatment plant being installed at the Lough Owel site, monitoring should include the continuous turbidity measurement at the outlet of each filter on the final water using instruments capable of detecting changes of less than 0.1 NTU.
6. Westmeath County Council has implemented a 24-hour continuous monitoring system for *Cryptosporidium* at the source of the public water supply in Lough Owel until a suitable treatment plant has been put in place (ie, a filtration unit).
7. In the event of an outbreak of *Cryptosporidium* occurring linked to a water supply it is important to issue a Boil Water Notice as soon as possible. The Boil Water Notice should not be deferred pending the development of criteria for its removal.
12. When rescinding a Boil Water Notice, it should be advised that immuno-compromised persons may need to boil all water from any source and allow it to cool before use.
13. Communication with the media is essential in every outbreak situation. It is recommended that this task be performed by a designated communications officer.
14. It is recommended that a system be prepared for the rapid dissemination of information to the public, as this can be a limiting factor in an outbreak situation.

### Acknowledgements

I wish to acknowledge the individual roles of the SEHOs and the EHOs in this outbreak – without their professionalism and commitment, this outbreak would not have been managed in such an effective and efficient manner.

The Environmental Health Department gratefully acknowledges the assistance and support from:

- The Public Health Department, in particular Dr Phil Jennings, Specialist in Public Health Medicine
- Westmeath County Council and all officials involved in this outbreak
- Ms Rachel Chalmers, Head PHLS, *Cryptosporidium* Reference Unit, Swansea Public Health Laboratory

- Professor Paul Hunter, Professor of Health Protection, School of Medicine, Health Policy and Practice, University of East Anglia
- Miriam O’Byrne, City Analyst, Ringsend, Dublin
- Dr Brian Smyth, Regional Epidemiologist, CDSC, Belfast
- Mary Keane, Principal EHO, ERHA.

The above is a brief synopsis of the details of the management of this outbreak.

Further information, copies of leaflets, etc, are available from the Environmental Health Department, Longford/Westmeath Community Care Area, Midland Health Board, Republic of Ireland.

### Footnote

1. In the UK, the Water Supply (Water Quality) Amendment Regulations 1999 S.I. 1527 set the legal limit of 1 oocyst per 10 litres when water was sampled over a 24 hr period. However this level was set as an operational standard and was not derived from known public health grounds.

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## SOUTHERN CENTRE NEWS

by Paul Bradley, former Centre Secretary

The Southern Centre AGM was held in Glasgow on 25 September. The Management Committee elected for 2003/04 is:

Robert Steenson (Chair)  
 Paul Kerr (Vice-Chair)  
 Martin Valenti (Secretary)  
 Jacqueline Cunningham  
 Carole Simpson  
 Evonne Tennant

There are two remaining vacancies which the Committee will address at their first meeting.

After the formal business of the evening and refreshments, the annual Southern Centre Pub Quiz took place. At the end of a keenly fought contest the *Weapons of Mass Distraction* proved the winning team.

Anyone with ideas for the Committee to consider should make contact via the REHIS office.

## WORKPLACE TRANSPORT SAFETY – TRAINING EVENT

by Steve Dunn, Central, Fife & Tayside, Liaison Group Training Co-ordinator

Environmental Health professionals from constituent authorities of the Central, Fife & Tayside Health and Safety Liaison Group participated in a one-day training event at Tesco’s Distribution Centre in Dundee on 2 September 2003.

To fit with the HELA Strategy Priority Programmes, the Group made contact with Tesco enquiring if the company would allow such an event to raise awareness of officers to the hazards presented by the movements of large goods vehicles and fork lift trucks in a warehouse environment.

The event comprised both presentations by several relevant tiers of site management and an accompanied tour of the whole site. This site was originally developed in 1972 to service the retail stores of Wm. Low Ltd, a company acquired by Tesco in 1994. The fleet based at the site comprises 39 LGV tractive units and 58 trailers (3 double deckers) making around 650 deliveries per week. The warehouse is serviced by 35 FLT’s (various types) and 48 Order Picking trucks.

The site, under Wm. Low, was used for both dry grocery and temperature controlled food products but is now wholly dry grocery stock. The main warehouse building has also been substantially extended in recent years as part of the continual appraisal of stock range and volume management on what is now a restricted site in respect of future expansion. Company figures show that there has been a 70% reduction in lines stocked but a doubling of volume throughput.

The site tour included everything from the gatehouse control procedures to the Goods Despatch area and the associated activities on racking, order picking, battery handling, vehicle parking and internal road network design.

The current safety regime is under regular audit, with the company recently introducing IOSH based training for site management personnel with an award scheme for LGV drivers. The site operatives have also demonstrated their involvement with an increased number of safety representatives supporting the various Action Teams.

The feedback from 28 delegates has been positive. Responses indicated that generally the event was of value and their knowledge of this topic had increased.

## DRIVING UP FOOD SAFETY STANDARDS - REHIS SUPPORTS LICENSING OF FOOD PREMISES

by Andrew Jamieson



### Introduction

The introduction of any form of food premises licensing has been an issue of some debate amongst the Environmental Health profession in recent years. It has been the subject of various presentations, seminars and workshops at REHIS events as well as articles and letters to this Journal. Having considered the arguments for and against, the Institute has agreed to support the principle of all food premises being licensed. It recognises that licensing means different things to different people, and that a precise definition is, therefore, extremely important in making clear what we support. The aim of this article is to provide the necessary information on the Institute's food premises licensing policy and give some background about the current status of the issue.

### REHIS Background

In the Institute's Development Plan, under the heading 'Promotion', REHIS undertook to provide a range of guidelines and policy notes on Environmental Health topics. The issue of extending licensing to all food premises is one where guidance and a policy decision was clearly required, since it is an area of importance and current debate amongst our members, the wider food industry, and the enforcement community.

It was first considered by Council Members at a REHIS Council meeting on 1 September 2001, when it was agreed that the Institute would adopt a formal policy on the licensing of food premises once the report on the effectiveness of the first year of butchers' licensing was published by the Food Standards Agency Scotland (FSAS). The subsequent

report on the evaluation of butchers' shop licensing in Scotland was formally launched by the FSAS on 10 December 2002.

At the REHIS Council meeting on 26 May 2003, the Institute agreed to support the principle of licensing of all food premises, following discussion and consideration of a full report on the issue. The preparation of a policy paper, defining exactly what REHIS considers to be 'licensing', was remitted to the Environmental Health Promotion Committee. Completion of the policy paper was delayed in order to take account of further discussions which took place on the related matter of 'prior approval' of food businesses, at the FSA Enforcement Liaison Group (UK) (ELG) meeting on 21 August 2003.

### Food Standards Agency (FSA) Position

The FSA Board had considered the issue of licensing at their November 2001 Board meeting, when they were discussing an Action Plan to increase the uptake of HACCP (Board paper FSA 01/07/02). They agreed that licensing was not seen as a practical means to increase HACCP uptake at that stage, but that it could be considered at later stage, depending on the extent of progress with the FSA HACCP Action Plan.

A full debate on the issue of food premises licensing took place at the ELG meeting on 13 August 2002, a group on which REHIS is represented. There were presentations from the Consumers' Association, LACORS and CIEH for the concept with the British Retail Consortium arguing against the proposal. The 'for' arguments had been well rehearsed, and the arguments 'against' appeared to centre on the lack of effective use by food enforcers of current enforcement powers, and that licensing would not catch 'rogue traders' who currently were not registered and evaded inspection. This view was endorsed by the Food and Drink Federation. The review of the effectiveness of butchers' licensing was still awaited, and whilst no agreement was reached about taking the matter to the Agency's Board, it was agreed that the views expressed would be disseminated to senior officials in the Agency.

LACORS, CIEH, IFST and the Consumers' Association, all organisations supporting licensing, wrote jointly to Sir John Krebs after the meeting, asking about the next steps the Agency would take

on the issue. His response was reported at the ELG meeting on 20 February 2003 where he gave a firm commitment to carry out a full review of the Agency's current policy, involving all relevant stakeholders, although no timescale was given. The new EU hygiene legislation, the results of the studies on butchers' licensing and evaluations of the Agency's HACCP strategy and Food Hygiene campaign were all awaited before this could be done.

At the ELG meeting on 22 May 2003, the Chair asked that the introduction of 'prior approval' for all food businesses be explored at the next meeting. This reflects the acceptance of amendments to the draft food hygiene regulation by the European Commission, which allows member states to introduce prior approval at national level. Position papers were, therefore, requested from the main stakeholder groups for consideration at that meeting, including one from those in support of licensing. Due to the timing, prior to REHIS making a decision on food premises licensing, we were unable to take a full part in these submissions. We did, however, advise the professional organisations in favour of prior approval of the subsequent decision of the REHIS Council to support the principle of food premises licensing and our willingness to have some input into the process. The Institute was given an advance copy of the submission prior to the next meeting.

The issue of prior approval of food businesses was then discussed at the ELG meeting on 21 August 2003; the aim being to assist the FSA by outlining the views of the major stakeholder groups. A paper favouring prior approval, as the first step towards a more comprehensive licensing scheme, was presented by CIEH, LACORS, the Consumers' Association and the Institute of Food Science and Technology (IFST). All new businesses would be subject to prior approval, replacing the existing, ineffective registration requirements. Premises would require to meet current food hygiene requirements before they were permitted to open, with penalties (perhaps a fixed penalty) if they failed to do so. No new requirements would be applied, merely existing provisions, but, crucially, with the power to revoke approval if premises subsequently failed to comply with these requirements. This position paper was endorsed by REHIS at the meeting, to the extent that the Institute supported the principle of all food premises being licensed.

There were three papers then presented against prior approval, from the Food and Drink Federation (FDF), the British Retail Consortium (BRC) and finally the British Hospitality Association (BHA).

The FDF was not convinced that prior approval was needed, believing that strengthening current registration requirements together with more effective inspection and policing by local authorities was a better approach. BRC had a similar approach, considering prior approval as being effectively licensing. It wanted an investigation into the failure of the current registration scheme. As all food businesses would be covered, it had a concern that many clearly had a much lower risk than others, and the costs would be disproportionate. Doubts were also expressed, as previously, over the scheme catching 'rogue traders' who flouted the law and did not currently register. The BHA was supportive of more effective use of existing registration and stated that there was no evidence that prior approval would work. They wanted to await the outcome of the evaluation of butchers' licensing (in England and Wales).

Discussions then followed and it was generally agreed by all concerned that it was reasonable for enforcers to have the power to prevent businesses from opening that were not compliant with the legislation. There was no agreement on whether businesses, when trading, should be approved or required to have a licence. The FSA Board will be discussing the issue of prior approval at the Board meeting in June 2004, when the views expressed by the stakeholder groups will then be taken into account.

### **The REHIS Licensing Policy**

In defining the licensing policy, the Institute has taken account of the concerns of our members, as well as the review of butchers' licensing in Scotland. The likely future developments in food legislation from the EU are a major consideration, since it is within this framework that any licensing scheme would need to work. It is for this reason that we have given further consideration to the papers presented on 'prior approval' at the ELG meeting in September this year, since this is a pragmatic way to achieve the control which the Institute considers to be essential, within the existing legal framework. If Food Authorities are to achieve the targets set for them by the Food Standards Agency, successfully implement the new HACCP-based requirements and improve the standards in all food businesses, this additional power is necessary. The development of a more comprehensive, traditional licensing scheme would not be required if approval to trade applied to all food premises.

The Institute's policy on licensing food premises envisages a universal approval scheme with the following characteristics:

1. Only an approved food premises and its proprietor may open and trade, with strict penalties applied for operating premises which are not approved;
2. Any new food premises and its proprietor would require the prior approval of the Food Authority before the new business is allowed to commence trading. The conditions for prior approval would be compliance with existing food hygiene requirements including appropriate training and supervision of staff, and appropriate hazard analysis and control measures, as well as compliance with relevant food standards legislation, all before the premises open for trade;
3. Conditional approvals could be available in circumstances where there is minor non-compliance with requirements;
4. The Food Authority must have the ability to refuse approval to new food businesses and their proprietors;
5. Existing food businesses with existing registrations or approvals known to the Food Authority would be deemed to be approved under the new scheme;
6. A general duty on all food premises to demonstrate compliance with food safety requirements;
7. A requirement for all food businesses to notify relevant and significant changes in the nature and activity of the business to the Food Authority, including change in proprietor and any other alteration to the business which increases the risks of food poisoning or other hazards, with appropriate penalties applied for failure to do so;
8. The Food Authority must have the ability to suspend or revoke an approval, so that all approved food businesses must continue to trade and operate in compliance with current legislation, with clear guidance made available to both food businesses and enforcement officers on when it is appropriate to do so;
9. No requirement for any formal renewal of approval, therefore no formal licensing inspection other than that prior to new businesses coming into operation. The existing risk based approach to inspection frequencies would be maintained, so that enforcement effort would continue to be focussed on those food businesses which most require it. Low risk premises would have a reduced threshold of standards to meet than those expected of higher risk premises;
10. A relevant appeals procedure system must be set up for appeals against a refusal, revocation or suspension of an approval. Although appeal to the Courts must always be available, the provision of an interim step to allow the matter to be considered prior to the Courts should be investigated. The use of a fixed penalty system within the scheme should also be considered, where appropriate to do so;
11. Food Authorities would continue to maintain a register of approved food premises.

### **Other Considerations and Implications**

There are reasonable concerns from officers as well as food businesses over the bureaucratic burden on them, arising from any type of licensing scheme. For that reason the Institute considers that the principal aims of licensing can be achieved by taking the approval approach which minimises the administrative burden. Nevertheless, full consultation with both enforcers and food businesses, and a reasonable lead-in implementation period, would be essential for the approval scheme to be successful. REHIS recognises the need to support the introduction of the approval scheme, but considers that any resource implications for food authorities will be much reduced, and if a charge was required it would be proportionate, reflect administrative costs and should not be a major burden on food businesses. Working jointly with organisations representing the various food businesses would be essential in reducing problems with the scheme's introduction.

### **HACCP Implementation**

The consolidation of the EU Food Hygiene Regulations now has a current earliest implementation date of 1 January 2006. This is going to require that all food businesses have a food safety management system based on HACCP (ie, risk based with control of hazards) with documentation and records commensurate with and proportionate to the size and nature of the business.

Food Authorities are still having difficulties in making sure that food premises maintain acceptable standards now, whilst trying to get them to improve further. Officers are expected to continuously improve standards in food premises and achieve the targets set out by the Agency, with nothing more than the existing legislation and prosecution system available to enforce it. In addition to the national FSA targets on HACCP implementation and reductions in food borne infection, the Food Standards Agency Scotland (FSAS)

recently announced a new target for 80% of all catering premises in Scotland to be operating documented HACCP-based controls before 1 January 2006. Achieving such targets prior to the legislative requirement will be extremely difficult and is likely to remain challenging even when the legislation comes into force.

There is a need for an ‘imperative’ to be applied to all food businesses if we are to engage them in any process of improvement, including HACCP extension. Even where the new requirement for HACCP is law, failure to comply is still eventually going to have to be resolved using the existing legal system. Prosecutions take a great deal of officer time and effort, yet often take far too long to resolve and can be lost for technical and legal reasons, not necessarily related to the merits of the case. The result can be disappointing, with low levels of fines being imposed. Whilst it is noted that improvements to the Procurator Fiscal service are being addressed by the Crown Office, this is likely to be a matter which will improve only in the long term.

If an approval scheme was in effect it would provide an additional focus for food businesses to comply with food safety requirements. An imperative was provided for the butchers through the licensing scheme, which focused the butcher proprietors, and a similar focus will be necessary if we are to make improvements across the range of other food businesses.

### Training Requirements

Whilst the approval scheme does not introduce any additional requirements for training, REHIS recognises that the underpinning knowledge and understanding of food safety in food businesses needs to be improved, as it is a major impediment to improving standards in food businesses. The additional requirements for HACCP-based management systems are likely to give rise to even more training needs. The Institute will be lobbying for more demanding training as a requirement of food safety legislation and this could be easily incorporated into the approval scheme.

### Additional Benefits

Raising the expected standards of compliance with the requirements of food legislation in food businesses is a fundamental component of the approval scheme. Those premises which are caught in a continual cycle of improvement followed by decline could be more effectively addressed. These are the premises which come up to an acceptable standard after intervention by inspecting officers, usually following an increased regime of inspections and check visits

(greater than the risk based frequency inspections), and then decline when they revert to the standard inspection cycle with less frequent visits. They meet minimum acceptable standards only when enforcement action is taken, or threatened, together with more officer time being spent on them. The application of prohibition procedures, with the need to satisfy the health risk condition, is only applicable in the most serious of situations, and the process itself is an administrative burden. These premises and proprietors are the most difficult to address through the prosecution system, particularly when they are not bad enough to merit a case being taken, yet they could perhaps be controlled through the suspension or removal of an approval to trade.

### Conclusions

Whilst many of our members and other enforcement officers in Scotland hold conflicting opinions about the benefits of food premises licensing, REHIS as a professional organisation which aims to benefit the community has taken a wider view of the issue. It is acknowledged that there remain details which will need to be given further consideration, however, the policy has now been clearly defined. The Institute believes that the approval scheme will be as effective as a formal licensing scheme in improving and maintaining the standards in food businesses, without the disadvantages. It will aid enforcers in their work, will be welcomed by consumers, and food businesses will benefit from a ‘level’ playing field.

The Institute recognises that there is little likelihood of legislation for an approval scheme being brought in before the consolidation of the EU Regulations. There is an opportunity when these new EU Regulations are implemented for member states to introduce prior approval at national level, and providing that it is accepted that food businesses should have a continual obligation to meet approval standards, a scheme as outlined is a possibility. The introduction of an approval scheme before the implementation of the new Regulations would, however, need to be considered if there was any further delay in the process.

REHIS will now actively promote this policy, and try to influence the Government, Food Standards Agency, food businesses and consumers of the benefits which it will bring.

#### *Acknowledgement:*

I wish to acknowledge Crawford Morgan’s contribution to the awareness of the licensing issue in Scotland.

*Andrew Jamieson is the Council member with responsibility for food safety matters.*

## 21ST ANNUAL CONFERENCE - 27 AND 28 MAY 2003 - NAIRN - PHOTOGRAPH GALLERY PART TWO



*Ian Gray responds to a question, encouraged by, from left, Keith McNamara, Val Cameron and David Cameron, the Session Chairman.*



*The Highfield Award winners and their Training Centre tutors with the President. Jayne Sprenger from Highfield Publications is fifth from the left. REHIS is grateful to Highfield Publications for providing these awards for the Institute's community training courses each year for over a decade.*

## JOINT STATEMENT OF THE CIEH, EHOA AND REHIS ON SMOKING AND ENVIRONMENTAL TOBACCO SMOKE (ETS)

ETS is a complex mixture of over 4,000 compounds. Over 50 of these compounds are known to be or suspected to be human carcinogens.

Research indicates that non-smokers working with smokers have a 20% to 30% increased risk of contracting lung cancer.

International studies have demonstrated the serious adverse effects passive smoking has on health. These include cancer, heart disease and an increased risk of respiratory diseases.

Voluntary codes are not going to protect employees in the workplace, particularly those in the hospitality sector.

The Environmental Health Officers' Association (Ireland), the Chartered Institute of Environmental Health (England, Wales and Northern Ireland) and the Royal Environmental Health Institute of Scotland fully support the proposed legislation prohibiting the smoking of tobacco products in the workplace, including licensed premises, clubs, restaurants and other places of employment to be introduced in Ireland in January 2004.

We call on the Health and Safety Authorities to classify Environmental Tobacco Smoke as a human carcinogen and to legislate accordingly. The dangers of ETS must be eliminated from all places of work.

Therefore we call on the UK Government to introduce legislation imposing an outright ban on smoking in all workplaces including pubs and restaurants.

The EHOA, CIEH and REHIS are committed to playing a full and active role in the promotion of a Tobacco Free Environment.



## COMMUNITY PLANNING IN ACTION - AN ENVIRONMENTAL HEALTH PERSPECTIVE

by Val Cameron MREHIS, FRSH, MCMI



### Introduction: The Public Health Change Process

Over the last two centuries there have been huge changes in society and the health of the population. This has been brought about by reactive controls through systems, advances in science and technology, and statute.

In the nineteenth century issues like poor housing, overcrowding, unfit food and water supplies, and unsanitary workplaces caused tremendous hardship for people and infectious diseases were rife. In 1846 alone, around 200,000 people died in the UK from cholera.

As these changes took place our professional ancestors changed to meet the demands of the day.

We heard, at the Institute's Congress in 2002, that 13,000 Scots died in 2001 from smoking related illnesses like cancer and coronary heart disease. As these are not infectious diseases, we feel powerless to control them, and yet we know that the health of the population must be improved.

In the twenty-first century, people are still sleeping on the streets, food poisoning figures continue to rise, and water supplies are affected by pollutants and organisms like cryptosporidium.

It is now time for us to change our approach, and to emerge to meet the challenges facing the people of Scotland, whose health is amongst the poorest in Europe.

### What is Community Planning? Do EHOs have a role to play ?

At the REHIS Congress in 2002, colleagues from Perth and Kinross Council gave a series of presentations on Community Planning, and it is not my intention to repeat what they said.

However, since then, the Local Government in Scotland Act 2003 has been introduced and this strengthens the statutory framework for Community Planning in Scotland and introduces the 'power to enhance well being'.

Managers across the country are trying to decide how this will be put into action.

The framework requires better alignment of local issues with the national priorities, which include health, community safety, the environment, social justice, and social inclusion. These are the main cross-cutting themes of interest for the Environmental Health profession in Scotland.

Community Planning is based on partnership working at local level and these partnerships are developing all over Scotland. There is no fixed remit or scope for local partnerships and these are developing to meet local priorities.

One of the Scottish Executive's central themes for policy development is Health Improvement, the 'new' twenty-first century approach to public health reform.

Public health is fundamental to EHOs, in fact some colleagues started their careers as Public Health Inspectors. To meet the changes in society, the 'New Public Health Agenda' has three main facets: Health Protection, Health Promotion, and Health Improvement.

We are all familiar with **health protection**, it's what we do every day, whether in food safety, infectious disease control or health and safety in the workplace. EHOs are trained to assess the risks to the health of individuals and populations and to apply measures to protect them. This can be done informally or by enforcement.

**Health promotion** is raising awareness, so that the people in our communities can make informed choices about their lifestyles. Many of us are directly involved with this. EHOs are proactive in ensuring that the people in our communities receive and understand positive health messages.

**Health improvement** is the long term strategic planning element of the public health agenda and in many local authorities is being led by colleagues from Social Work or Education backgrounds.

I believe that strategic planning for health is the key to securing improvements in the health of the population, and that all health professionals must be included in that planning process. It is very sad that many EHOs across Scotland are not included.

One criticism of the Environmental Health profession is our lack of vision. We are very practical people and good at putting legislation into practice, but how many of us are involved in policy development?

We are so busy meeting performance targets at operational level that we do not have time to look ahead.

In addition, successive reorganisations of local government have down-sized and devalued our role, and so many Environmental Health managers are not involved in strategic issues.

This must change.

### **Joint Health Improvement Plan (JHIP) - The Orkney Perspective**

Every local authority in Scotland is currently developing a JHIP.

In 2001, Susan Deacon, then Minister for Health, announced pump-priming funding for public health capacity building within local authorities. At the same time, a network of Public Health Managers was created by CoSLA. The funding allowed each local authority in Scotland to appoint a Policy Officer for Health Improvement. Across Scotland this post holder is based in a variety of different departments and has a cross-cutting remit within the local authority and across all agencies.

In Orkney the post holder is attached to Environmental Health.

In January 2002 the multi-agency Public Health Improvement Team (PHIT) was created. The Health Improvement Policy Officer facilitates the PHIT and is responsible for co-ordinating the development of the Joint Health Improvement Plan. Representatives from all of the agencies are responsible for writing their contribution to the Plan.

The development of the JHIP is a process, as is partnership working. The JHIP will only be effective when partnerships have matured, and mutual respect and trust have been built up.

The PHIT is a second tier strategic Community Planning group and the JHIP is a second tier strategy under the Community Plan. The JHIP is underpinned by numerous other shorter term strategies and plans, eg, the Area Waste Strategy, National Air Quality Strategy, Community Care Plan and the NHS Local Health Plan, etc.

The Community Plan, *Orkney 2020*, was published earlier this year and outlines the jointly agreed objectives of all partners.

The JHIP for Orkney concentrates on the 'Healthy and Caring Communities' section of *Orkney 2020*, although it takes account of many other interconnected themes.

#### **The Community Plan objectives for health are:**

- To ensure equitable access to adequate and reliable health and care services for all who need to use them
- To promote healthy lifestyles
- To promote positive mental health and well-being
- To raise awareness in the community of environmental impacts on health
- To reduce the incidence of communicable diseases and food-borne illness
- To take positive action throughout the community to minimise the harmful effects of drugs, alcohol and smoking.

Out of the six objectives above, two of them have direct importance for Environmental Health.

Partners on the PHIT for Orkney have expanded the key themes into a number of sub-categories. The following list covers themes four and five above.

#### *Environmental impacts on health*

- Waste management
- Contaminated land
- Air quality
- Radiation/nuclear
- Water quality
- Dog fouling/pests/litter/local amenity
- Housing conditions
- Health and homelessness
- Healthy workplaces.

*Reduce communicable diseases and food-borne illnesses*

- Monitoring of food businesses
- Food source surveillance
- Disposal of the dead
- Response to infectious disease
- Port health
- Sexually transmitted disease
- Immunisation.

### **Partnership Working in Practice**

EHOs already work in partnership with colleagues in other departments and the NHS, in fact this is a statutory requirement.

In Orkney, partnership initiatives include ‘The Island Food Roadshow’, and ‘The Community Warden Pilot Project’, which has given a huge amount of data on environmental health, community safety and anti-social behaviour issues in our community.

### **Conclusion**

Community Planning is about communities working together to meet jointly agreed objectives. Many of these objectives follow themes and require multi-skilled teams to work in partnership to put the objectives into action. These teams draw together professionals from all departments and organisations who have an interest in that theme. This is known as matrix management.

I believe that EHOs have a huge amount of experience to offer, if given the opportunity. Our great strength is our holistic approach to public health and this needs to be directed into strategy development. Few people actually know what we do and so often we are left out. It is vital that we ensure our place in the Community Planning process, although this is not a right:

- We cannot rely on the past for respect, we must earn it.
- We must identify and clearly state our position and align it with strategic policy making, only then can we ensure our place in the process.
- Times have changed and we must change too – and quickly.
- We must ‘seize the day’ – and that day is now!

*This article is based on a paper presented at the 21st Annual Conference on Environmental Health, Nairn, 27th May 2003. Editor:*

## **MANAGEMENT COMMITTEE**

*by David Cameron, Committee Chairman*

The Management Committee meeting on 1 October discussed the General Reserve Fund and the potential projects to be considered for use of this source of funds. One slightly disappointing feature of this issue was the definite lack of proposals which had been received. A proposal from the Environmental Health Promotion Committee to promote Environmental Health was further discussed and funding allocated.

Other financial issues discussed revolved around our performance against budget for the first six months of the current financial year. There were two very positive features from the Treasurer’s report. Firstly, our income was well in line with the 2002/03 financial year, which resulted in a healthy surplus. Secondly, all our budget expenditure headings were in control. These achievements are in no small measure the result of the Treasurer’s diligence in presenting a budget this year which added a new heading to control expenditure arising from recommendations for development work from committees not anticipated at the time of budget approval.

A report was received from our Public Relations Advisor on the success of the PR strategy that was implemented in September 2002. The level of media exposure achieved by REHIS during this 12-month period was substantial. In respect of the above budget we were on target for expenditure on PR. It was, therefore, decided to continue our current arrangement until the end of the financial year.

The 22nd Annual Conference will be held at an Edinburgh venue on 18th and 19th November 2004. This is a departure from the history of 21 Annual Congresses or Conferences being held in May of each year.

This was the last meeting of the Management Committee which I will officially chair. I should like to take this opportunity to thank my committee colleagues for their efforts throughout the year. In my first report on the committee, I indicated that this was the start of a new approach which would be dependent on the efforts of all committee members and not just a few willing individuals. My experience with this particular committee suggests that the vision is beginning to come to fruition. It is early days but willing volunteers are capable of great things.

## A TIME FOR CHANGE

by Allan Davies, Head of Local Authority Unit, Health & Safety Executive

### Introduction

This is my first opportunity, at least within this publication, to both introduce myself, although I have visited colleagues in Scotland on a number of occasions, and also give some indication of the issues I am considering in my capacity as Head of the Local Authority Unit for the Health and Safety Executive (HSE).

I am an Environmental Health Officer, qualified in 1975, so there's an immediate dead give away about my age, but my experience has been varied ranging from my student days in Swansea, on to London for a number of years before returning to Wales in 1978. Later, in 1984, I took the unusual step, for that time, and left local government for the private sector to work for Tesco. I was there for seven years, advising the company, initially in South Wales and the West, but later nationally as the Company Chief Environmental Health Officer. I have now embarked upon a career as a civil servant having left Tesco in 1992 to return to local government, where I was a Director of Environmental Services until September last year.

I have been a 'civil servant' for over a year now; a different experience, although I have to say that I have been warmly welcomed and there is a strong desire to understand the difficulties faced by local authorities together with a willingness to work in partnership. Oh, if only it could be as simple as that!

### Thoughts for the Future

I would like to share with you my thoughts about how we might all work together in the future and then perhaps give an update on what has happened over the last year in developing a health and safety strategy. I believe health and safety in the workplace is something that local authorities can have a tremendous positive influence over, especially at the regional and local level. I would also like to think that those responsible for delivering health and safety enforcement at a local level could be part of the policy making process and be more included. I would like to see HELA build upon its successes and seek new and different ways of working, a process already being considered through a root and branch

review, which is being undertaken jointly by local authority and HSE representatives. I want to see pathways created to help in the task of enforcement without obstacles; do we need the legal maze of the Enforcing Authority Regulations, for instance, or is there a more direct route? How can we produce guidance for all, those in the various trades and those enforcing, such that the guidance is less complex and more user friendly? Surely we must also be able to develop tools to help local authorities become more strategic in their approach to health and safety regulation, especially with national and multi-national businesses, and to allow greater focus on important areas that perhaps are currently being overlooked?

The Health and Safety Commission is clear that the current enforcement arrangements, between the HSE and local authorities, needs to change:

*'A new and genuine partnership between the two is required and crucial to this is redefining the current division of enforcement responsibilities in a way that is relevant to the modern working environment and capitalises on the strengths of both HSE and LAs'.*

The HSE will be working with local government over the coming months to develop and build this new partnership, exploring key issues such as communication, intervention strategies, legislation, regional working and mutual support.

The Commission has made some firm proposals for change and these were set out in a document entitled 'A Strategy for Workplace Health and Safety in Great Britain to 2010 and Beyond'. This document was published in October with a view to receiving comments and reporting to the Commission in December, so 2004 will be an important time for health and safety.

There are opportunities for local government to have a much more effective involvement in health and safety enforcement in Great Britain but this may be the last chance, be sure they are not wasted.

## FOOD STANDARDS AGENCY SCOTLAND NEWS

*by Rhea Hussey, Communications Officer, Food Standards Agency Scotland*

The FSAS's presence at a number of events across Scotland has attracted a large amount of attention. But the work doesn't stop there.

After a busy summer of exhibitions and shows, this winter the FSAS will be asking the public to put their thinking caps on. To round off another successful year, the Agency is bringing 2003 to a close by spreading the message of food hygiene in innovative and exciting ways over the festive period.

### **Getting in a Lather at the Ideal Home Show**

Handwashing isn't exactly the kind of activity you'd expect to see going on in the middle of the Ideal Home Show in Glasgow's Scottish Exhibition and Conference Centre.

However that's precisely what happened as countless members of the public flocked to the Food Standards Agency Scotland's stand at the event.

The FSAS 'cartoon kitchen' interactive stand included, as well as the handwashing unit for visitors to check exactly how well they wash their hands, other interactive exhibits such as a custom-built oven and fridge indicating how food ought to be stored and cooked as well as microscopes so people could get close up to images of the kind of food borne bugs proper food hygiene will wipe out.

A new attraction on the stand was the feedback toaster, designed specially for the FSAS with bread slice-shaped feedback forms.

George Paterson, Director of FSAS said: "The stand was inundated with members of the public who weren't just interested in the numerous leaflets we had on show, but who wanted to get involved with the exhibits and test their own knowledge of food safety issues."

### **Primary Schools Christmas Card Competition**

As part of the Agency's food hygiene campaign, all Scottish primary schools have been invited to take part in a competition to design the organisation's Christmas card which will be distributed to hundreds of addresses throughout Scotland in December.

The competition is open to all primary school pupils and one winner and 11 runners-up will be chosen – those 12 designs will be used to create the FSAS' 2004 calendar. The cards must be based on a food safety theme and the winner will receive a commemorative-framed card plus £250 worth of fitness or health equipment and the runners up will receive goody bags.

The winning school will have the chance to take part in a cookery demonstration with a well-known chef and also receive £1,000 to be spent on an FSA approved project. Further to this, all 12 schools will receive the commemorative FSAS 2004 calendar.

Marie Kelly, FSAS General Food Hygiene Branch Head, said: "The earlier we can educate people to think about important food safety and hygiene messages the better – a few simple steps, such as washing your hands thoroughly and making sure food is properly cooked or stored in the fridge can help stop food borne illnesses. Not only does this competition allow children the chance to be creative while learning about essential food hygiene principles, it also offers great prizes and opportunities for the winners and their schools."

### **Young Consumer of the Year**

Carrying on the food hygiene theme, FSAS is sponsoring a round of questions specifically related to food hygiene at the Young Consumer of the Year competition to be held on 28th October, at Lomond Shores in Balloch. The Agency has donated £400 towards a prize.

### **Minister's Visit to Aberdeen**

In late September, the Agency had a visit from Tom McCabe MSP, Deputy Minister for Health and Community Care. The Minister took a walk-about in the office to meet staff and then held a question and answer session, which proved to be immensely popular.

A good relationship with The Scottish Parliament is essential for FSAS. The Agency acts as an independent voice within government, able to give advice and publish it, without asking politicians first. In order to keep the public notified and protect public health, the information given to Ministers from the Agency is published on a daily basis and can be found on the website at [www.food.gov.uk](http://www.food.gov.uk).

### **A Recipe for Christmas Success**

FSAS is hoping to hold another of these popular events, hosted by Wendy Barrie, sometime before Christmas. This time Wendy will prepare a traditional Christmas dinner while teaching the importance of cooking food properly and in a hygienic way. This is set to coincide with the Agency's Christmas turkey television campaign which is due to be aired from early December.

## SEPA NEWSROUND

by John M Beveridge, Director of Public Affairs and Corporate Communications, SEPA

### SEPA takes on PELI

*(Named after an agreed strategy on external liaison and implementation planning; not a footballer.)*

PELI is a SEPA initiative to become more closely involved in what is happening in Europe with regard to initiatives and proposals for possible directives from the EU. It is intended that, via this means, SEPA will be able to influence the development (whether policy or legislation) before it becomes a directive either at EU level or subsequent transposition into UK law.

A Board has been established comprising officers from within SEPA, but with a representative from the Scottish Executive. Already, initial assessments of 35 emerging and proposed developments have been carried out on lead policy and other staff across SEPA and these are currently being prioritised.

New EU developments will similarly be assessed as they become known. This will help to focus SEPA's attention and concentrate resources on the most important issues that will be of interest to Scotland. The earlier that any proposed initiatives are known the better. Among the first to be considered are the Emissions Trading Directive, which has to be transposed by 31 December 2003 and which will require SEPA to prepare an implementation plan

and charging scheme by April 2004. A directive proposing changes to the quality of bathing waters is in preparation. This will need to be transposed within two years of its adoption by the EU. Tighter standards and potential for designation of more bathing water sites will require significant investment by the water industry and changes in agricultural practice. This will have impacts on SEPA, local authorities and the Scottish Executive and it is important that these are understood as early as possible.

### Bathing Water Quality

SEPA is very pleased to be able to report the best bathing water results since monitoring began. With the 2003 sampling programme now complete, 95% (57 out of 60) of Scotland's identified bathing waters have met European quality standards. The number of waters attaining the higher 'guideline' quality standards has also substantially increased with over 60% reaching the guideline standard, much better than previous best performance. For the first time ever, three South West waters achieved guideline standards. However three bathing waters failed the mandatory standards – Brighthouse Bay and Rockcliffe on the Solway Firth, and Ettrick Bay on the Island of Bute. The two main causes of failure were diffuse pollution and sewage effluent and this ties in very



*SEPA North Regional Board at Nethy Bridge Sewage Treatment Works.*



*SEPA North Regional Board at a fish farm in Stornoway.*

well with SEPA's action plan for visiting all farms in the areas and concentrating on potential diffuse sources of pollution.

### **New Flood Warning Schemes**

SEPA is to receive funding from the Scottish Executive to introduce new Flood Warning Schemes along the rivers Clyde, Kelvin and Irvine. The new schemes will benefit up to 15,000 properties in the area. SEPA will also receive funds to provide National Flood Maps on the internet by 2006. The National Flood Maps and the new Flood Warning Schemes will help those at risk to plan in advance and minimise the misery that flooding brings. The single most important thing people can do is to prepare. SEPA's Annual Flood Awareness Campaign during October was targeted particularly at areas of risk, with Flood Fairs being held in Haddington, Elgin and Glasgow. The campaign included national TV and radio advertising, a travelling 'ad' trailer promoting Floodline information across the country, and a launch by the Deputy Minister for Environment and Rural Development, Allan Wilson, at Victoria Quay, Edinburgh.

### **SEPA's Boards when they move - again**

SEPA's Regional Boards continue to visit and meet in different parts of the country. East Regional Board visited and met at the Avecia pharmaceutical company plant in Grangemouth; West Regional Board (along with the SEPA Main Board) visited the Caledonian Paper Mill in Irvine; and the North Regional Board met in Stornoway with visits to

fish farms and to Aviemore seeing the Cairngorm Mountain Railway, a land based fish farm, and Nethy Bridge Sewage Treatment Works. After the high-tech wonders of the mountain railway, the workings of the latter (now called a Waste Water Treatment Works!) proved to be particularly interesting, being a remote rural works with no power supply and relying on gravity to operate.

### **Tailpiece**

One of the most significant enforcement notices which has been served by SEPA was on UKAEA for its plant at Dounreay. Following the discovery by SEPA officers of rabbits entering the operational pit of the solid radioactive waste disposal facility at Dounreay, through holes in the facilities boundary fence, and of rabbit burrows in the earth caps of closed disposal pits, the enforcement action was taken. The notice requires UKAEA to take measures to limit wildlife access to waste disposed of in the facility, to develop and implement a programme, including surveillance, to prevent wildlife access to the facility, and to quantify and make good the damage created by wildlife intrusion. SEPA staff will be 'hopping' for a satisfactory outcome!

For all the latest information on campaigns, initiatives, publications, (SEPA 2002/03 Annual Report is due out in November), go to our website on [www.sepa.org.uk](http://www.sepa.org.uk).

*The photographs accompanying this article were kindly provided by Jennifer Cook, a member of the SEPA North Regional Board.*

## SCOTTISH POLLUTION CONTROL CO-ORDINATING COMMITTEE

by Jacqueline R Cunningham

The most recent meeting of the SPCCC took place in Glasgow on 27 August 2003 and the following main subjects were discussed.

### Contaminated Land

Bob Cuthbertson from the Scottish Executive advised that, in Scotland, only where no other guidance is available should the ICRCL guidelines be used for reference.

Some discussion took place on the proposed new Regulations and guidance which are due out in March 2004 and will take account of the requirements of the Water Framework Directive and include the word 'significant' with respect to pollution of controlled waters.

### Noise

The subject of noise performance indicators was discussed and it was recognised that SPCCC should make a response to Audit Scotland regarding the group's concerns about misinterpretation of the definition of 'completed'. The group felt that this was an ideal opportunity to have an input to the consultation document for 2004. It was agreed to feed back to the Society of Chief Officers in order that SPCCC was not contradicting any response that may be made from them.

The Central & West Liaison Group had previously asked about the possibility of REHIS signing up to a document entitled '*Guidance on the Creation and Maintenance of Effective Noise Management Policies and Practice for Local Authorities and their Officers*'. This document is being drafted by the Chartered Institute of Environmental Health (CIEH) and is seen to be of merit to those involved in noise pollution.

It was decided by the Scottish Executive (ref: UK Noise Forum) that it would look into the viability of Scotland producing its own version of this document and whether the existing DEFRA funding would cover the Scottish version. It was also agreed that members of SPCCC would determine the extent to which any amendments to the CIEH version would be required to ensure that it met Scottish requirements.

There was considerable debate on the Anti-Social Behaviour consultation recently distributed by the Scottish Executive. The document makes a number of proposals involving noise, litter, and graffiti, however the points giving most cause for concern at

the group involved the use of fixed penalty notices for noise, the provision of night time noise services, and the proposed use of community wardens to deal with noise issues. Discussion took place on the powers already available to the Police in Scotland to deal with many aspects concerning anti-social noise problems in terms of the Civic Government (Scotland) Act.

REHIS has made a response to the Scottish Executive on this consultation document and you should contact the REHIS office should you wish to view this paper.

### Air

Andrew Taylor, Scottish Executive, reported that 25 out of the 32 USAs (Up-date Screening Assessments) had been returned and it was also reported that there had still only been a few applications for funding for vehicle emission testing and that funding was still available to undertake this initiative.

The Scottish Executive would also encourage local authorities in Scotland to carry out strategies on air quality if they are not declaring Air Quality Management Areas, even although this is not a statutory requirement. It is likely that DEFRA will publish examples of good strategies in England and Wales on its website.

The following extract is taken from a previous SPCCC report which stated: '*the problem of serving a Statutory Nuisance Notice to abate foul odour arising from Sewage Treatment Works as a result of a magistrate's ruling, stating that works of this nature were not "premises" was also discussed. The group were advised of an appeal that had been lodged south of the border by a council and, following the outcome of the appeal, DEFRA and the Scottish Executive will decide on the appropriate way forward, one option would be the amendment of the EPA'90 to include Sewage Treatment Works as premises.*'

Duncan McNab of the Scottish Executive reported that the case at the High Court in London upheld Hounslow Council's appeal, therefore local authorities can serve a Section 80 Notice, in terms of the Environmental Protection Act 1990, involving sewage treatment works. It is thought that the Water Authority is to further appeal this decision, however the Scottish Executive is of the opinion that the High Court ruling is applicable throughout the UK.

## Land

The group was made aware of the amendments to the Waste Management Licensing Regulations 1994, whereby the requirements to register an exempt activity are more onerous on the operator in an attempt to ensure that the exempt activities are not purely a method of disposing of waste and that there is some form of environmental benefit in undertaking the waste activity. The amendments refer to the spreading of specific waste types for agricultural benefit or ecological improvement, and the use of

specific waste types for relevant work as defined in the Regulations. Further amendments are proposed to the controls on composting activities.

The next meeting will take place on 26 November in Glasgow. Once again thanks to all who participate in the group, in particular, Alastair Brown (Secretary) and David Paris (Chairperson).

*Jacqueline Cunningham is the Council member with responsibility for pollution matters.*

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## PUBLIC HEALTH AND HOUSING WORKING GROUP

*by Alistair Thomson*

The Public Health and Housing Working Group met on 10th September in Stirling and considered a full agenda.

Several major legislative changes, which had been the subject of consultation, were discussed including the following:

### Mandatory Licensing of Housing in Multiple Occupation

Licensing of HMOs continues, as per Government guidelines (prioritising enforcement in relation to the size of property) and, as from 1st October 2003, houses occupied by only three persons from separate families now require to be licensed.

An Amendment Order also made on 1st October 2003 has made significant changes to the operation of the licensing scheme viz:

- Houses owned by a co-operative housing association are now exempt from licensing.
- Resident owners of an HMO and any family members also resident should be disregarded when calculating the number of persons resident in the house. This would **not** apply where a parent bought a house for a student to share with friends, unless the student is a joint owner.
- It is now an offence for an agent to act for a unlicensed HMO owner (penalty up to £5000).
- Funding for HMO licensing will no longer be pooled together with other licensing activities, to be covered by the fees charged overall. Instead, the expense of HMO licensing will

be covered by HMO fees taken, together with specific funding provided by the Scottish Executive. In this regard, the Scottish Executive has recently allocated 'ring-fenced' funding to local authorities for HMO regulation and has identified proposed enforcement objectives for each authority.

### New Provisions for Housing Improvement and Repairs Grants

Major changes in the administration of housing grants for the improvement and repair of houses were made by Part 6 of the Housing (Scotland) Act 2001. Secondary legislation introduced the new grant scheme with effect from 1st October 2003. Although all grants will now be means- tested, it will be possible, in some cases, to award 100% grants up to £20,000 in respect of grant-eligible work. The main changes are as follows:

#### a) Works

Councils will now be able to offer grants for a wider range of elements including:

- The provision of adequate heating systems and insulation
- The replacement of unsafe electrical wiring
- Installation of mains-powered smoke detectors; and
- In buildings in common ownership, main door entry phone systems and fire doors at the entrance of each house.

**b) Property age**

Councils will be able to approve grant assistance towards necessary works to houses over ten years old, rather than the old 'pre-1964' rule. Grants may be given in respect of newer properties for works to meet the needs of a disabled occupant.

**c) Test of resources**

Councils will be obliged to test the resources of all applicants (except in some cases where 50% grants can be awarded, eg, disabled facilities, lead pipe replacement). In determining the resources available to an applicant, councils will require to include any income from the following sources:

- Income from earnings, savings and investments, occupational pensions, and any rental income
- For adaptations, the income of the disabled person and their partner will be assessed or the income of the parents of a disabled child
- All income from welfare benefits and tax credits will be excluded from the assessment.

Deductions will be made to the gross income to take account of:

- All mortgage payments (including capital and interest repayments) and rent payments not covered by housing benefit
- Allowances for each child under 16 or 21 if in full-time education. Additional allowances will be deducted for any disabled child
- An allowance if either the partner or applicant or partner is disabled.

It should be noted that, should councils approve a grant, then those in receipt of income support or income based job seekers' allowance will be passported to 100% grant. In addition, 100% grant will also be available to those who are assessed as having no income apart from benefits.

The Public Health & Housing Working Group draws on the collective expertise of members to ensure appropriate and comprehensive responses on consultation subjects such as those above.

*Alistair Thomson is the Council member with responsibility for public health and housing matters.*

## ENVIRONMENTAL HEALTH PROMOTION COMMITTEE

*by Paul Bradley, Committee Chairman*

The committee met during October and made progress on a number of issues.

One of the main aims of this committee has been to address the Institute's work in relation to 'technical matters'. A new system to allow the Institute to produce policies, guidance and make other 'technical' decisions was approved. The system will allow for suggestions made by members, Centres, working groups or any other forum within the Institute to be dealt with in an efficient manner which ensures discussion, consultation and measurement against set criteria.

I hope that this new system will allow us to improve both the quality and quantity of technical advice we provide. The system will also allow for decisions to be made more quickly than in the past.

The committee has also looked at the question of technical working groups. After consideration of a number of options, the Chief Executive has been asked to explore the possibility of setting up subject-based forums on the REHIS website.

As is usual we received a number of reports from Institute representatives on working groups and outside bodies. These were, as always, received with the committee's thanks to the members who attend these meetings and keep us apprised of developments in the wider environmental health community.

A brochure, *Environmental Health Securing Safe, Healthy Environments*, has been printed. This is part of the 'Plan of action to address the 21st Century Public Health Agenda' project funded by the General Reserve Fund. Keith McNamara has responsibility for the project and must be congratulated on this brochure.

At the time of writing the return of Annual Report questionnaires is disappointing. Further efforts are being made to encourage all local authorities to respond. The next meeting of the committee will consider the future for the Annual Report.

A new area of work for the committee is the production of a film promoting a career as an EHO in Scotland. This will be financed by the General Reserve Fund for 2003/04. If possible, production will be in a manner that allows for the economical production of a partner film giving a general overview of the environmental health function in Scotland.

## NORTHERN CENTRE REPORT

by Hazel Cameron, Centre Secretary



### Windfarm Seminar

Since my last report, the Northern Centre has hosted its last seminar for 2003. The seminar on Windfarms was organised and chaired by Dave Cooper and was well received by all the 32 delegates, summed up on one of the evaluation forms as 'Nice one Dave'.

Unfortunately, the Northern Centre seminar gremlins were in attendance again with the absence of our first speaker, Maf Smith, due to car problems. However our second speaker, Ray Hunter, set the scene for the day by giving a précis of Maf's presentation on 'The Future of Renewables'. Here he emphasised the need for developmental resources and the need for more sophistication with regard to the choice of suitable sites for windfarms.

Ray's own presentation was based on the developer's perspective, outlining the work of his company Renewable Energy Systems Ltd. This is a broad based wind energy company currently developing, constructing and designing wind turbines. He highlighted the many varied disciplines required to fully develop a windfarm project, including noise and visual impacts, accessibility for maintenance, and the impact on the environment of constructing the access roads.

Jonathon Ball of Macaulay Enterprises then looked closely at environmental impact, beginning with a visualisation of Aberdeen Bay as proposed by Aberdeen City Council. This futuristic view enabled us to see the layout of wind turbines as they would be in the Bay area if the plan goes ahead.

Other aspects of environmental impact included: shadow flicker from the turbine blades, especially in low winter sun and the ensuing nuisance factor,

disruption to roads, paths and water flow, problems associated with TV and cell phone signals, and the need for consultation with landowners.

Jonathan left us to think about the cumulative effect of building more windfarms, what the visual impact of this will be and how this will be a greater issue for planners in the future:

"If a tree falls in the forest where no one can hear it does it make a sound?"

"If a windfarm is built where no one can see it is the landscape aware of it?"

Dr Jeremy Bass of R.E.S. led us through the afternoon session with an in depth look at associated windfarm noise, starting with the different types of noise and how to measure and assess the noise from windfarms. He explained how blade design, or subsequent damage to rotors, can affect the type or amount of noise emitted. The emitted noise can then disrupt the breeding patterns, flight path and migration routes of some species of birds.

Property values in surrounding areas can fall seriously because of both optical and acoustic effects:

"A noise you can feel rather than hear."

That this was a very informative seminar was borne out by the ratings on the seminar evaluation forms. All three speakers gave excellent presentations and subsequently generated lots of discussion.

### Northern Centre AGM

The seminar was followed by the Northern Centre AGM. All 23 members present endorsed the REHIS Council nominations of David Cameron, President; Graham Robertson, EHO (North); and Martin Henry, (Others).

Thanks go to Ian Powell who retired as Chair of the Northern Centre and we wish him well in his new post at Grampian Primary Care NHS Trust. In his place we welcome our new Chair, Nicola Paton, of Moray Council and, new to the Northern Centre Management Committee, we welcome John Bell of Aberdeenshire Council.

Thanks also to Helen Barron who found time in what has been a very busy Presidential year to come to both the seminar and the AGM and to give a brief report on the main events organised by REHIS. She also urged members to submit topic suggestions to the Northern Centre Management Committee for future seminars.

## IFEH MATTERS

by Mike Halls

The principal activity for the Federation in late summer/early autumn was a meeting of the Europe Group held in Vilnius, the capital city of Lithuania. The delegates attending the meeting came from Cyprus, Denmark, Ireland, Latvia, Netherlands, Sweden and the Chartered Institute of Environmental Health, as well as a number from the Lithuanian Union itself and, of course, REHIS.

The member organisation based in Lithuania is entitled the Lithuanian Union of Hygienists and Epidemiologists (LUHE) and, on the day prior to the Europe Group meeting (Friday), it held a Conference in the second city of Lithuania, Kaunas. The Conference was organised by the Lithuanian Public Health Association (LUHE is a member of this Association) with assistance from the European Public Health Association, the Kaunas Public Health Centre and the Open Society Fund Lithuania.

It was a fairly high profile event and attracted a host of dignitaries and speakers from the UK, Lithuania, Latvia, Ireland, Kaliningrad and Belarus. The organisers had arranged for translation to take place during the morning session and the lady who was charged with the task was remarkable in that she translated all six papers from Lithuanian into English or *vice versa* without actually reading the papers, relying only on what she heard the speakers say – a truly amazing feat!

Since the Europe Group meeting was in Vilnius and the Conference in Kaunas, the IFEH delegates who were based in Vilnius had a mini-bus ride of 100 kilometres each way and, having left the hotel in Vilnius at 0715, did not return until nearly 2245 hours – so much for the cushy life of a conference-goer!

The Group's meeting (over Saturday and part of Sunday) commenced with presentations by six members of the ruling Council of LUHE on various aspects of their work on environmental health in Lithuania. The most interesting presentation, from the author's standpoint, was one on the first results of a survey into Housing and Health in Vilnius. The project was supported by WHO and was one involving simultaneous surveys of the same topic in cities in other 'emerging' countries. It is hoped that the results of all the surveys will be available in the not-too-distant future.

Other topics covered included a project on Health Promoting Schools, on Environment and Health

Indicators, on Inter-sectoral Co-operation and on Lithuania's National Environmental Health Action Plan. Members of the Group were unanimous in the praise for the work which their Lithuanian colleagues are carrying out in what is still a country coming to terms with freedom from Russian rule.

The main business of the Europe Group was to confirm arrangements whereby the Group officially decided to form itself into a legal entity, so as to aid its proposal to obtain funding from the European Commission. The Council of the whole Federation had authorised this action at its meeting in Scotland earlier in the year. Work has now been completed in so far as the application is concerned and it is to be hoped that the Commission will be more amenable to the request than it has been in the past two years.

The Group also took time to discuss and agree how it should try, on behalf of IFEH as a whole, to influence the agenda of the Ministerial Conference on Environment and Health, which is due to take place in Budapest, Hungary in June 2004. The theme of this Conference (which is a follow-up to the London Conference held in 1999) is Children and Health, and IFEH Europe hopes to try to make its views known not only to the Ministers and senior Civil Servants who will be attending the Conference itself, but also to play a significant role in the Healthy Planet Forum, which is planned to run concurrently with the main Conference.

REHIS members working in SCIEH (which is, of course, an Associate Member of IFEH) have made significant inputs to some of the papers to be placed before the Ministers, notably that dealing with a proposed Children's Environment and Health Action Plan for Europe.

The subject of Housing and Health also features strongly on the agenda for the politicians, having been totally ignored in the Conference five years ago. This will, it is to be hoped, lead to a commitment to improve the living conditions of many Europeans, amongst whom children suffer more than most.

As usual at such meetings, the social events are very enjoyable and in this regard, our Lithuanian hosts were a model in terms of hospitality. It was particularly pleasant to meet members of LUHE who had travelled to Scotland on an exchange visit some years ago and there is no doubt that, as well as them learning from us, we can learn a lot from them.

## REHIS/SFSORB PROFESSIONAL INTERVIEWS 4/6 NOVEMBER 2003

by Tom Bell, Director of Professional Development

The following candidates were successful in gaining their respective qualifications:

### REHIS: Diploma in Environmental Health

Lee Adams  
*City of Edinburgh Council*

Linzi Buchanan  
*Dundee City Council*

Lisa Cowan  
*West Lothian Council*

Alasdair Cruickshank  
*Glasgow City Council*

Claire Devlin  
*City of Edinburgh Council*

Julie Robertson  
*Glasgow City Council*

Jennifer Watkins  
*City of Edinburgh Council*

Lucy Williams  
*City of Edinburgh Council*

Natalie Williams  
*Fife Council*

### SFSORB: Higher Certificate in Food Premises Inspection

Lorna Davidson  
*Aberdeen City Council*

Sabrina Kelly  
*Aberdeenshire Council*

### SFSORB: Ordinary Certificate in Food Premises Inspection

Jane Docherty  
*Perth & Kinross Council*

### SFSORB: Higher Certificate in Food Standards Inspection

Ailsa Downie  
*South Ayrshire Council*

Susan Urquhart  
*East Ayrshire Council*

## REHIS MEMBERSHIP SURVEY

by Keith McNamara and John Frater

All members of REHIS received a membership survey questionnaire in November 2002. 253 members kindly responded to the survey. From an initial analysis of the questionnaires received, the following findings are of particular interest:

- 80% of members have been a member for over five years, with an impressive 43% being in membership for over 15 years.
- 69% of respondees are EHOs; this almost exactly correlates with the 71% EHO membership of the Institute.
- Members' views on the usefulness of four particular types of event were sought. The following percentages show the *very useful* or *quite useful* responses:

Training courses	95%
Centre events	92%
Annual Conference	92%
AGM	80%

- Members' views on mailed items were sought. The following percentages show the *very useful* or *quite useful* responses:

Environmental Health News	93%
REHIS Journal	90%
Job advertisements	54%

- Members' views on five areas of work were sought. The following percentages show the *very good* or *good* responses:

Community training	75%
Practical training of EHOs	69%
Professional training (EHO)	64%
Professional training (others)	55%
Dealing with the media	23%

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## REHIS POLICY STATEMENT ON A LEVY ON PLASTIC BAGS

The Institute's Environmental Health Promotion Committee is seeking help in preparing a draft policy statement on a levy on plastic bags. It will be delighted to hear, via the REHIS office, from any member who would like to work on this statement for subsequent discussion by the committee.

## FROM THE COURTS

### Glasgow City Council

Accused: Lionel Arthur Levy  
 Address of Premises: Flat two up one, 144 Woodlands Road, Woodlands, Glasgow  
 Legislation: Housing (Scotland) Act, 1987  
 Date of Offence(s): 13 November 2002  
 Brief account of case: Failure to comply with a Section 162 Notice to upgrade means of escape in the event of fire.  
 Date Determined: 2 September 2003  
 Outcome: Changed plea to guilty at Intermediate Diet  
 Penalty: Fined £1,000  
 Other Observations: The necessary work to comply with the Notice was completed prior to the Diet.

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Accused: Louise Jane Gauld  
 Address of Premises: Main door flat, 3 University Avenue, Glasgow  
 Legislation: Civic Government (Scotland) Act, 1982, (Licensing of Houses in Multiple Occupation) Order, 2000  
 Date of Offence(s): 28 October 2002  
 Brief account of case: Failure to license a house in multiple occupation occupied by six persons.  
 Date Determined: Trial date on 19 September 2003  
 Outcome: Pled guilty  
 Penalty: Fined £200  
 Other Observations: Licensing Application submitted prior to the date of the trial.

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Accused: Louise Jane Gauld  
 Address of Premises: Flat three up one, 5 University Avenue, Glasgow  
 Legislation: Civic Government (Scotland) Act, 1982, (Licensing of Houses in Multiple Occupation) Order, 2000  
 Date of Offence(s): 2 October 2002  
 Brief account of case: Failure to license a house in multiple occupation occupied by five persons.  
 Date Determined: Trial date on 19 September 2003  
 Outcome: Not Guilty  
 Penalty: N/A  
 Other Observations: Licensing Application submitted prior to the date of the trial.

Accused: Mrs Rakshanda Hussain  
Address of Premises: Flat two up one, 2 Ruskin Place, Glasgow  
Legislation: Civic Government (Scotland) Act, 1982, (Licensing of Houses in Multiple Occupation) Order, 2000  
Date of Offence(s): 20 November 2002  
Brief account of case: Failure to license a house in multiple occupation occupied by five persons.  
Date Determined: Trial date on 22 September 2003  
Outcome: Pled Guilty  
Penalty: Fined £600  
Other Observations: Situation to be monitored and enforcement action taken, as necessary.

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### Renfrewshire Council

Accused: Abdul Raziq  
Address of Premises: Shalamar Superstore, 8 Ladyburn Street, Paisley, PA1 1PH  
Legislation: Regulation 44(1)(d) of The Food Labelling Regulation 1996  
Date of Offence(s): 19 October 2000 and 8 March 2001  
Brief account of case: Following customer complaints, officers from the Department visited Shalamar Superstore, 8 Ladyburn Street, Paisley on the 6 and 19 October 2000 and 8 March 2001. At each visit food beyond its 'Use by' date was found on display. Two reports were submitted and these were combined and the case was heard on 24 October 2001 at Paisley Sheriff Court. Mr Raziq pled guilty to two charges and was fined £250.  
Date Determined: 24 October 2001 at Paisley Sheriff Court  
Penalty: Fined £250.

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Accused: Whitbread Group plc  
Address of Premises: The Hillington Brewer's Fayre, Napier Road, Glasgow, G52 4DR  
Legislation: Sections 3(1) and 33(1)(a) of the Health and Safety at Work etc. Act 1974  
Date of Offence(s): 26 February 2002  
Brief account of case: A four year old boy was almost hanged by a piece of loose netting in a play area. He was found by his father, on a chute with a piece of netting entangled around his neck. Daily play equipment inspection records indicated that defects were highlighted but repairs were not carried out. Employees had inadequate training in the inspection and maintenance of the play area and safety netting was frayed and holed and there were exposed loose lengths of safety netting cord.  
Date Determined: 12 September 2003 at Paisley Sheriff Court  
Outcome: Pled Guilty on Indictment  
Penalty: Fined £30,000.

**Scottish Environment Protection Agency (SEPA)**

Accused:	Binn Landfill (Glenfarg) Limited, Glenfarg
Offence Reported:	S.33(6) EPA 1990. Emission of offensive odours in contravention of Waste Management Licence.
Outcome:	Fined £9,000, 14 April 2003. ***
Accused:	Nexfor Limited, Cowie
Offence Reported:	S.6,7 and 23 EPA 1990. Failure to use BATNEEC to prevent the release of a quantity of resinated wood fibre.
Outcome:	Not proven verdict, 30 April 2003. ***
Accused:	Kristol Engineering Services Limited, Kilwinning
Offence Reported:	S. 13(3) Radioactive Substances Act 1993. Causing or knowingly permitting disposal of a radioactive source.
Outcome:	Fined £3,000, 12 May 2003. ***
Accused:	The Scottish Coal Company, New Cumnock
Offence Reported:	S. 30(F)(1) CoPA. Causing or knowingly permitting contaminated water to be discharged into the River Nith.
Outcome:	Fined £5,000, 13 May 2003. ***
Accused:	Scottish Water, Cairneyhill
Offence Reported:	S. 30(F)(3) CoPA. Causing or knowingly permitting sewage effluent to be discharged into a burn.
Outcome:	Fined £5,000, 23 May 2003. ***
Accused:	Dumfries & Galloway Council, Dumfries
Offence Reported:	S. 30(F)(1) CoPA. Causing or knowingly permitting landfill leachate to be discharged into controlled waters.
Outcome:	Fined £2,000, 28 May 2003. ***
Accused:	Scottish Water, Peebles
Offence Reported:	S.30(F)(3) CoPA. Causing or knowingly permitting trade effluent to be discharged into a burn.
Outcome:	Fined £5,000, 4 June 2003. ***
Accused:	WISCO Processing Ltd, Stornoway
Offence Reported:	S.30(F)(1) CoPA. Causing or knowingly permitting sodium hydrochlorite to enter a river.
Outcome:	Fined £8,000, 18 June 2003. WISCO is appealing against the level of the fine. ***
Accused:	Stirling Water Seafield Limited, East Calder
Offence Reported:	S.30(F)(3) CoPA. Causing or knowingly permitting sewage effluent to be discharged into a burn.
Outcome:	Fined £2,000, 18 June 2003.

Accused: Alexander Ross & Sons (Sand and Gravel) Limited, Inverness  
Offence Reported: S.30(F)(1) CoPA. Causing or knowingly permitting surface water containing suspended solids to enter controlled waters.  
Outcome: On 26 June 2003 sentence was deferred for six months to allow the company to liaise with SEPA about arrangements for improving their waste water management system. When the case appeared for sentencing again in September it was deferred for a further two weeks.

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Accused: Inveresk PLC, Carrongrove Paper Mill, Denny  
Offence Reported: S.30F(3) CoPA 1974. Causing or knowingly permitting trade effluent to be discharged into controlled waters.  
Outcome: Sentencing was deferred for three months to allow SEPA to monitor the situation, 7 July 2003.

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Accused: Inveresk PLC, Caldwell's Mill, Inverkeithing  
Offence Reported: S.23(1)(c)EPA 1990. Failing to comply with the requirements imposed by an enforcement notice (to install and implement a technique to abate malodorous emissions).  
Outcome: Fined £8,000, 8 July 2003

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Accused: Scottish Water, Cove Burn, Cardwell, Gourrock  
Offence Reported: S.30F(3) CoPA 1974. Causing or knowingly permitted sewage effluent to be discharged into controlled waters.  
Outcome: Fined £2,500, 24 July 2003.

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Accused: D Geddes (Contractors) Ltd, Monikie Burn  
Offence Reported: S.30F(1)CoPA. Causing suspended solids (soil) to enter controlled waters.  
Outcome: The company was admonished, 30 July 2003

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Accused: G F Bisset (Inverbervie) Ltd, Gourdon, Aberdeenshire  
Offence Reported: Burning construction waste contrary to S.33(1) of EPA.  
Outcome: Fined £1,000, 13 August 2003

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Accused: Scottish Water, Dalmuir Waste Water Treatment Works  
Offence Reported: S.30F(3) CoPA 1974. Causing or knowingly permitting sewage effluent to be discharged into controlled waters.  
Outcome: Fined £15,000, 15 August 2003

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Accused: Scottish Water, Auchengeich Sewage Treatment Works, Moodiesburn  
Offence Reported: S.30F(3) CoPA 1974. Causing or knowingly permitting sewage effluent to be discharged into controlled waters.  
Outcome: Fined £3,000, 16 September 2003

## LETTER TO THE EDITOR

*from Lotte Niemann and Kirsten Hesselaa, Silkeborg Kommune, Denmark*

We are 2 women from Denmark, Lotte and Kirsten. We are hoping for a 2 week stay in Scotland.

Lotte is 40 years old and mother to 4 girls, Kirsten is 37 years old, and mother to 2 boys.

We are working in the environmental department at the town hall of Silkeborg. We have both worked with environmental regulation on a municipal level for many years. The municipality of Silkeborg has a population of 52,000 of whom 32,000 live in the city of Silkeborg.

In the environmental department we are seven employees. The environmental department takes care of pollution control of companies, agricultural pollution control, supervision with watercourses, handling of polluted soil and other topics within the environmental area. The environmental department is well known for its work in re-establishing free passage for fish in streams and creating reproduction areas for salmonids.

Most of our companies are small to medium sized. We also have a few larger companies.

Being known as the 'City of Cars' we have quite a lot of smaller companies in the car repair-business.

Our medium sized companies consist of iron and metalworking industries and furniture manufacturing industries.

In the department we have divided the main subject between us.

Kirsten is working with a quality management handbook for our field of work, environmental management, hazardous waste, and industrial pollution control.

Lotte's main subjects are wastewater, IT solutions in environmental programs, and industrial pollution control.

It is difficult to say what we are especially interested in. We are dealing with a broad spectre of subjects, but topics such as wastewater, environmental management and hazardous waste are in general interest, as well as industrial pollution control. We would also like to learn more about how environmental work is organised in Scotland.

In the spring of 2002 we had the pleasure of hosting James White, and that visit started our curiosity about how you are doing things in Scotland. We would also like to experience Scottish nature and culture.

We hope to hear from you soon.

Yours sincerely

*Lotte Niemann and Kirsten Hesselaa*

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John Sleith adds:

Members will be aware that REHIS has a 'partnership' with its Danish equivalent Institute (FMK). This is to encourage work exchanges between Environmental Health practitioners of both countries.

James White, a REHIS member, has already made the trip to Denmark and in return hosted a visit by two female Danish officers. James contributed an article on his work exchange visit to *Environmental Health Scotland*, Volume 13, Number 3.

The Danish association's secretary, Steen Fogde said, "I have a number of inspectors in different places in the country, excitedly waiting to get the information that they are going to host a colleague from Scotland soon."

The scheme is open to any member of REHIS with an interest in environmental protection. FMK members do not have responsibility for food matters, but deal mainly with Pollution Control issues. Broadly speaking, any approved application will receive generous assistance from REHIS towards travel costs. Accommodation is arranged on a reciprocal basis in the homes of exchangees.

Travel to Denmark, or hosting someone here can be arranged for any time of year.

For further details, or if you would like to host a visit from Lotte and Kirsten, please feel free to contact John Sleith on 0141 840 3197 or on e-mail: [john.sleith@renfrewshire.gov.uk](mailto:john.sleith@renfrewshire.gov.uk).