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STATUTORY INSTRUMENTS

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**2002 No. 2676**

**The Control of Lead at Work Regulations 2002**

**Medical surveillance**

**10.**—(1) Every employer shall ensure that each of his employees who is or is liable to be exposed to lead is under suitable medical surveillance by a relevant doctor where—

- (a) the exposure of the employee to lead is, or is liable to be, significant;
- (b) the blood-lead concentration or urinary lead concentration of the employee is measured and equals or exceeds the levels detailed in paragraph (2); or
- (c) a relevant doctor certifies that the employee should be under such medical surveillance, and the technique of investigation is of low risk to the employee.

(2) The levels referred to in paragraph (1)(b) are—

- (a) a blood-lead concentration of—
  - (i) in respect of a woman of reproductive capacity, 20#g/dl, or
  - (ii) in respect of any other employee, 35#g/dl; or
- (b) a urinary lead concentration of—
  - (i) in respect of a woman of reproductive capacity, 20#g Pb/g creatinine, or
  - (ii) in respect of any other employee, 40#g Pb/g creatinine.

(3) Medical surveillance required by paragraph (1) shall—

- (a) so far as is reasonably practicable, be commenced before an employee for the first time commences work giving rise to exposure to lead and in any event within 14 working days of such commencement; and
- (b) subsequently be conducted at intervals of not more than 12 months or such shorter intervals as the relevant doctor may require.

(4) Biological monitoring shall be carried out at intervals not exceeding those set out below—

- (a) in respect of an employee other than a young person or a woman of reproductive capacity, at least every 6 months, but where the results of the measurements for individuals or for groups of workers have shown on the previous two consecutive occasions on which monitoring was carried out a lead in air exposure greater than 0.075 mg/m<sup>3</sup> but less than 0.100 mg/m<sup>3</sup> and where the blood-lead concentration of any individual employee is less than 30#g/dl, the frequency of monitoring may be reduced to once a year; or
- (b) in respect of any young person or a woman of reproductive capacity, at such intervals as the relevant doctor shall specify, being not greater than 3 months.

(5) The employer shall ensure that an adequate health record in respect of each of his employees to whom paragraph (1) applies is made and maintained and that that record or a copy thereof is kept available in a suitable form for at least 40 years from the date of the last entry made in it.

(6) The employer shall—

- (a) on reasonable notice being given, allow an employee access to his personal health record;

- (b) provide the [<sup>F1</sup>appropriate authority] with copies of such health records as the [<sup>F1</sup>appropriate authority] may require; and
- (c) if he ceases to trade, notify the Executive forthwith in writing and make available to the Executive all health records kept by him.

(7) Where the blood-lead concentration for an employee equals or exceeds the appropriate action level, the employer shall take steps to determine the reason or reasons for the high level of lead in blood and shall, so far as is reasonably practicable, give effect to measures designed to reduce the blood-lead concentration of that employee to a level below the appropriate action level.

(8) In any case where the blood-lead concentration or urinary lead concentration of an employee reaches the appropriate suspension level, the employer of that employee shall—

- (a) ensure that an entry is made in the health record of the employee by a relevant doctor certifying whether in the professional opinion of the doctor the employee should be suspended from work which is liable to expose that employee to lead;
- (b) ensure that a relevant doctor informs the employee accordingly and provides the employee with information and advice regarding further medical surveillance;
- (c) review the risk assessment;
- (d) review any measure taken to comply with regulation 6, taking into account any advice given by a relevant doctor or by the Executive; and
- (e) provide for a review of the health of any other employee who has been similarly exposed, including a medical examination where such an examination is recommended by a relevant doctor or by the Executive.

(9) Further to paragraph (8)(a), where in the opinion of the relevant doctor the employee need not be suspended from work which is liable to expose that employee to lead the entry made in the health record shall include—

- (a) the reasons for that opinion; and
- (b) the conditions, if any, under which the employee may continue to be employed in such work.

(10) Where a relevant doctor has certified by an entry in the health record of an employee that in his professional opinion that employee should not be engaged in work which exposes the employee to lead or that the employee should only be so engaged under conditions specified in the record, the employer shall not permit the employee to be engaged in work which exposes that employee to lead except in accordance with the conditions, if any, specified in the health record, unless that entry has been cancelled by a relevant doctor.

(11) Where medical surveillance is carried out on the premises of the employer, the employer shall ensure that suitable facilities are made available for the purpose.

(12) An employee to whom this regulation applies shall, when required by his employer and at the cost of the employer, present himself during his working hours for such medical surveillance procedures as may be required for the purposes of paragraph (1) and shall furnish the relevant doctor with such information concerning his health as the relevant doctor may reasonably require.

(13) Where for the purpose of carrying out his functions under these Regulations a relevant doctor requires to inspect any workplace or any record kept for the purposes of these Regulations, the employer shall permit that doctor to do so.

(14) The employer shall ensure that in respect of each female employee whose exposure to lead is or is liable to be significant an entry is made in the health record of that employee by a relevant doctor as to whether or not that employee is of reproductive capacity.

(15) Where an employee or an employer is aggrieved by a decision recorded in the health record by a relevant doctor—

(a) under paragraph (10) that an employee should not be engaged in work which exposes that employee to lead (or which imposes conditions on such work); or

(b) under paragraph (14) that a female employee is of reproductive capacity,

the employee or employer may, by an application in writing to the Executive within 28 days of the date upon which the decision was notified to the employee or employer as the case may be, apply for that decision to be reviewed in accordance with a procedure approved by [<sup>F2</sup>the Health and Safety Executive], and the result of that review shall be notified to the employee and employer and entered in the health record in accordance with the approved procedure.

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#### **Textual Amendments**

- F1** Words in [reg. 10\(6\)\(b\)](#) substituted (1.4.2014) by [The Energy Act 2013 \(Office for Nuclear Regulation\) \(Consequential Amendments, Transitional Provisions and Savings\) Order 2014 \(S.I. 2014/469\)](#), art. 1(2), [Sch. 3 para. 106\(4\)](#) (with [Sch. 4](#))
- F2** Words in [reg. 10\(15\)](#) substituted (1.4.2008) by [The Legislative Reform \(Health and Safety Executive\) Order 2008 \(S.I. 2008/960\)](#), art. 1, [Sch. 3](#) (with art. 21)

**Changes to legislation:**

There are currently no known outstanding effects for the The Control of Lead at Work Regulations 2002, Section 10.