

Firefighters' Network Meeting

26 February 2021

Online meeting - Zoom

Draft Minutes

(Languages: EN, FR, DE, IT)

10.00 – 10.10	<p>1. Welcome, adoption of the agenda, adoption of the minutes</p> <p>Agenda and minutes adopted</p>
10.10 – 11.20	<p>2. Professional cancer: carcinogens and asbestos. Exchange with Kim Van Aken, Adviser to MEP Cindy Franssen, co-rapporteur of the upcoming legislative report on “protecting workers from asbestos”.</p> <p>Kim presented the ongoing procedures linked with this matter. CMD4, beating cancer action plan, asbestos.</p> <p>Discussion and overview of ongoing work by unions:</p> <p>UK: we are developing research, interim report finalised in December 2020. Important point is having a registry and incident log to gather data and evidence. Involve health screening and tests to try to identify most current diseases. We are campaigning for legislation to adequately protect those firefighters hit by diseases</p> <p>Germany: we have a study, not a final report but initial findings show that traces from exposure are found in the blood and in urine (lower level) but no level is above threshold anyway. Analysis of cotton linen after intervention. Limit values never exceeded either. This shows protective equipment can block but it needs to be kept properly. Swedish method to hygiene and cleaning method is working. All employers must report contamination values: prevention is something that is very important in our eyes. We are convinced that exposure levels during interventions are not too high, but protection and preventions measures are fundamental. It is impossible to take full ex-ante measures because you don't know what you will encounter (which substances). So what is key to put in place rights protocols and hygiene measures. Mortality levels are higher among firefighters. This is not only to exposures to substances but also for exposure on high heat and overwork. Exposure levels are lower to what in EU directive but firefighters are exposed to many substances (in the same of in different operations) and levels cannot be measured at the workplace. Amend directive CMD4 annex 1 include a provision to introduce a log of actions and substances in firefighters' interventions.</p> <p>France: reports in France, do not take into account exposure to asbestos for</p>

	<p>occupational disease. Important to have an active medical follow up for active and retired firefighters, like massive screening, blood testing, to early detect diseases. Being a firefighter should be enough for occupational disease: one exposure is enough, not repeated exposure needed for occupational diseases. In many countries there are surveys and they all give the same answers: more cancers than average population. There is no need for more surveys, we know the data. Real issue is to implement recommendation in real life. You can develop cancer 40 years after exposure. 1 single fire can trigger cancer.</p> <p>Italy: decontamination process has part of the operational protocols: the way we undress, with nanoparticles can be very dangerous (for example under helmet cover) We are trying to implement new techniques to undress. We simulated that after any fire, how to sanitize and replace PPE very quickly. Decontamination to reduce risks as much as possible</p> <p>Belgium: We have plenty of information and even the administration accepts to buy better equipment or develop better protocols, showing that danger exists. Seems that admin acknowledge that problem exist and available to pay for not finding a real solution. Hope the EU level can unlock this situation</p> <p>Sweden: our model was awarded 10 years ago as a EU good practice but, even with that model on protection from exposure, there are other factors: like how it is implemented and the issue with decontamination and how stations are built to avoid cross contamination. We need EU rules to push Member States to obligate every fire dept to follow rules. Important to consider both sides: prevention on one side but also, if we have not succeeded in prevent, how we classify diseases. Each country has its own regulation on classification of diseases, we would need something common grounds.</p> <p>UK: a small defense on data gathering, as we have many surveys. We agree, we need actions but we also need to keep collecting evidences. H&S agency: we needed to collect data to prove, for example, indirect contamination from fire stations, indoor testing. Levels of contaminants in what should be clean areas. Moreover, the issues of legislation and regulations: differences among Scotland and England for death certificates. Gaps in recoding and reporting. Wider impact of austerity, a decade of cuts made situation worse at local level. Importance of safety at the workplace. H&S agency inability to inspect workplaces is a problem.</p> <p>Italy: Until some years ago, Italy had the idea that firefighters did not need many protection measures, because it was the nature of the job itself to have risks. Fortunately, the mentality has changed. Many questions that were regulated for other workers were/are not always applied to firefighters as well. When something is not regulated at national level, we have to improvise or try to use the EU regulations to move forward, for example working time.</p> <p>Asbestos: vote in EMPL in September then plenary</p>
11.20 – 11.50	Break

11.50 – 13.00	<p>3. Climate change: follow up from ETUC project and exchange with Guillaume Durivaux, EPSU on current EPSU priorities. Update of the climate adaptation strategy (publication 14 February)</p> <p>Key points from discussion:</p> <ol style="list-style-type: none"> 1. Some countries are facing challenging in access to water, extinguish fire with drinking water in areas where there is water scarcity. 2. Issue of firefighters killed by wild fires is a global issue: which means are given to firefighters? The impact of austerity measures, cuts to staff and resources, coupled with larger operations due to how climate crisis is evolving is making it impossible to firefigthers and respond adequately and this leads to workers losing their lives. This is not a national issue but a global issue. 3. Equipment: how this can be adapted to the new challenges and operations that firefighters have to face due to climate change. Increase of fires due to climate change, but also floods and landslides. PPE need to be adequate, but climate change from another angles. More heat = more stress on firefighters and need of hydration during operations. 4. Use of chemicals during operations: in Sweden have a debate regarding foams that's put out fire, are supposed to be more environmentally friendly, but they still contain fluorochemicals that will never be broken down in the environment.
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