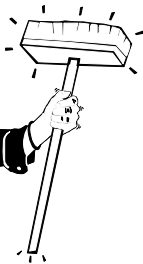


CLEAN START

FAIR DEAL FOR CLEANERS



17 October 2009

CLEANERS' TASKS AND INJURY RATES: A DANGER FOR THEM AND YOU

KEY POINTS

- Contract cleaners are exposed to one of the highest injury rates out of any industry in the country and cleaners injuries are likely to be serious
- These injury rates ultimately push up the price of cleaning contracts through high workers compensation premiums and expose property owners to prosecution under OHS legislation
- The physical nature of cleaning work combined with poor provision of cleaning equipment contributes to the high accident rates of cleaners

Injury rates are so high for contract cleaners that they surpass industries which involve heavy manual labour, dangerous machinery and other industries that one would rationally equate with higher injury risk. Workers compensation premiums in the commercial cleaning industry are currently rated second only to those in the concrete construction services¹. Workers in Cleaning Services for Government cleaning contracts are at greater risk than workers in roofing, demolition, abattoirs and saw mills.²

High workers compensation rates reflect the fact that cleaners are at high risk of sustaining workplace injuries³. These rates also reflect the serious nature of cleaners' injuries which have a higher on average cost and are more likely to lead to permanent disability.⁴ The loss of hours worked due to injuries has a flow on effect on the price of cleaning contracts. According to the WA WorkSafe Authority, in the four years from 2000 to 2004, 297 cleaning industry workers were injured seriously enough to miss at least 60 days of work.⁵

Extensive international and domestic research shows that the main cause of injury for cleaners is "body stressing" resulting in Musculoskeletal Disorder (MSD)⁶ accounting for 45% of all claims in the past 10 years in NSW.⁷ Rates of MSDs in cleaning are three times the rate of all other occupations.⁸ A WorkCover NSW report on what aspects of a cleaner's job contributed to the level and type of injuries in contract cleaning concluded that both the physical risk factors and the work organisational or "psychosocial factors" inherent in contract cleaning combined to create a high risk industry.⁹

¹ WorkCover NSW, *Insurance Premium Order 2009-2010*, WorkCover Authority of NSW, Sydney, 11 June 2009, Table B.

² *ibid.*

³ WorkCover NSW, *Assessment of the repetitive manual tasks of cleaners*, report prepared by F Weigall, K Simpson, A Bell & L Kemp of Health & Safety Matters Pty Ltd, Gympie, February 2005, p.38.

⁴ WorkCover NSW, *A guide for property owners and managers: health and safety for cleaning contractors in NSW*, Guide 1, WorkCover NSW, Sydney, 2003, pp1

⁵ *Cleaning inspection program reveals lack of awareness of safety requirements*, media release, Department of Consumer and Employment Protection, Government of Western Australia, 30 May 2006.

⁶ R Kumar & S Kumar, 'Musculoskeletal risk factors in cleaning occupation—A literature review', *International Journal of Ergonomics*, vol. 38, 2008, pp. 158–170; European Agency for Safety and Health at Work, *Cleaners and musculoskeletal disorders: E-Facts 39*, EU-OSHA, Bilbao, Spain, October 2008.

⁷ (WorkCover NSW 2002b)

⁸ WorkCover NSW, *Assessment of the repetitive manual tasks of cleaners*, p.9.

⁹ WorkCover NSW, *Assessment of the repetitive manual tasks of cleaners*, p.9.

Physical tasks such as mopping, dusting, vacuuming, scrubbing and polishing often involve awkward postures such as reaching overhead and bending, kneeling and squatting.¹⁰ Cleaning tasks also involve the lifting and carrying of heavy items such as waste bins (which can weigh as much as 27kg)¹¹ and cleaners are also regularly exposed to hazards such as wet floors, working on ladders and the use of strong or toxic chemicals such as bleach.¹²

Most commercial cleaning products are governed by strict manual handling codes and regulations. Chemicals can be particularly high-risk. Adequate storage and ventilation is mandatory for chemical use in cleaning in most if not all jurisdictions. Poor ventilation can affect respiratory and nerve systems where strong chemicals are used, and having access to basic facilities like toilets and running water are vital for those who may experience chemical splash from corrosive liquids such as bleach.

“Anyone who has had to work with a strong chlorine will know that it smells, it is highly irritating if used as a spray (it hurts like hell if it gets in your eyes), it is corrosive...and when concentrated the liquid is a class 8 Dangerous Good”¹³

One study found that spray bottles in almost 50% of cleaning rooms were not labelled with cleaners resorting to smelling the contents of bottles to identify chemicals.¹⁴ The failure to appropriately label such products, and provide appropriate protective equipment to those that use them is strictly prohibited in all jurisdictions, whilst providing equipment that is well maintained and improves ergonomics can minimise the risk of MSDs and radically improve the cleaning provided.¹⁵ However, in an effort to reduce costs cleaners are often not provided with the most basic equipment.

In a 2004 report on contract cleaning, one in five cleaners had to use the same mops for toilets as other areas and some cleaners were asked to cut sponges in half to save supplies.¹⁶ In the same study 15% of cleaners were not provided with rubber gloves and were required to provide their own.¹⁷

“Employers have also been able to make savings through the non-replacement of...damaged or broken equipment, thus putting the onus on workers to use more exhausting and time consuming manual methods’.¹⁸

This inadequate provision of equipment has implications for OHS hazards that extend beyond the cleaning staff who use it. Dr Charles Gerba reported that by not frequently replacing cleaning tools such as sponges and mops, they become “micropile compost heaps [causing the cleaning worker] to spread a thin layer of E. coli over the surface as they clean”.¹⁹ Not only does this defeat the purpose of cleaning, but also open the potential for diseases to spread to amongst tenants or others who use the building.

¹⁰ R Goggins, 'Hazards of Cleaning: Strategies for reducing exposures to ergonomic risk factors', Professional Safety, March 2007, pp. 20-27.

¹¹ *ibid.*

¹² *ibid.*

¹³ Greg Whitely 'Influenza Guidelines Ignore TGA System', *InClean Australiasia*, 8/06/2009

¹⁴ J Walsh, *Dirty Schools, Forgotten Cleaners: The Injuries of Victoria's Failed Experiment in Contract School Cleaning*, LHMU, Melbourne, December 2004.

¹⁵ D Caple, *The Canberra Hospital OHS Workload Assessment of Cleaning Work*, David Caple & Associates, East Ivanhoe, Victoria, 23 July 2007.

¹⁶ Walsh, *op. cit.*

¹⁷ *ibid.*

¹⁸ SF Ryan, "Dirty deeds done dirt cheap?" Employment relations and the organisation of work in the NSW commercial cleaning industry', PhD Thesis, University of Sydney, 2007, p. 64.

¹⁹ 'Using soiled cleaning tools dangerous', *InClean Magazine*, August/September 2009, p. 64.