

Hand Arm Vibration Syndrome (HAVS) Surveillance

Hand Arm Vibration Syndrome can cause painful vascular (circulatory) or sensory-neural problems with the fingers and hands. There is a strong dose-response relationship between the vibration exposure (trigger time and vibration magnitude) and the extent of the symptoms. The greater the exposure the more severe the symptoms.

What does the HAVS surveillance entail?

There are 5 levels of HAVS surveillance:

- Level 1 – this is a paper screen which should be completed at pre-employment stage where the individual has been exposed to vibration in the past or is likely to be during the course of their employment. Further Level 3 screen is required where the individual has been diagnosed with HAVS or is identified to be at risk of HAVS on the paper screen. Individuals should be cleared fit to work with vibration.
- Level 2 – this is a paper screen which should be undertaken annually where exposure levels are above the Exposure Action Level and there are no symptoms which are suggestive of HAVS. Further Level 3 screen is required where the individual identifies on the paper screen symptoms which are suggestive of HAVS
- Level 3 – this is a full medical with a competent Occupational Health professional and includes:
 - A full occupational and exposure history
 - Clinical, social and past medical history
 - Allen's Test
 - 2 point discrimination test
 - Manual dexterity test
 - Adson's test
 - Phalen's test
 - Tinel's test
 - Grip strength test
 - Blood pressure on both arms
 - Interpretation and explanation of the results to the individual
 - Provision of HSE information leaflet 'HAVS for Employees'
 - Completion of 'surveillance report form' for Personnel Records.
- Level 4 – This is a full medical with a competent Occupational Physician and builds on from the level 3 medical to include formal clinical examination and diagnosis.
- Level 5– This involves a group of highly specialized tests undertaken at laboratories throughout the UK and is required where there is some doubt regarding the staging of disease.

How long does it take?

Levels 1 and 2 take around 15 minutes to complete and can be done either remotely or together with the individual.

Level 3 takes between 60 – 90 minutes depending on the symptoms of the individual and the difficulties they are experiencing.

Levels 4 and 5 will depend on the results of level 3.

How often should HAVS surveillance be done?

Level 1 surveillance should be conducted at the pre-employment stage.

Level 2 surveillance should be conducted annually for those who do not have any symptoms of Hand Arm Vibration Syndrome (HAVS) with a level 3 surveillance being conducted every 3 years.

Level 3 surveillance should be conducted annually for anyone with symptoms or diagnosis of HAVS. This should be undertaken whether the individual continues to be exposed to vibration or not.

Level 4 and 5 surveillance should be conducted at the request of the Occupational Health professional conducting the level 3 surveillance.

What happens if abnormalities are detected?

If abnormalities are detected they will need to be investigated appropriately. Risk assessments and safe exposure levels should be reviewed accordingly.

If the HAVS staging is unclear, the following actions should be taken:

- The individual should be referred for a level 4 or level 5 HAVS screening;
- Duties should be restricted according to the Occupational Physician's guidance;
- Once a diagnosis has been confirmed, the case should be reported as a work-related health problem in the employer's accident book and under RIDDOR;
- Surveillance should be continued at level 3 on an annual basis.

In addition to Hand Arm Vibration Syndrome, carpal tunnel syndrome is another health hazard associated with vibration. It is important to consider the ergonomics of work involving vibration to reduce the risks from carpal tunnel syndrome as well as HAVS.



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