This dispute relates to the conditions of work of Radiographers in the Ministry of Health.

The applicants have submitted the following regarding their grievances.

(1) The failure of the Ministry of health to implement the Fin's Report on radiation issues which relate to an enhanced pension formula.

(2) The need of having a serious and proper Radiation, Protection programme for the protection of Radiographers from the serious occupational hazards of radiation.

(3) The desirability of appointing a Radiation Safety Officer from the grade of Senior Radiographers within each major X ray Centre, for a better control of protective measures in the interests of staff, the patients, etc.

(4) The desirability for the Ministry to take appropriate steps to curtail the improper use and abuse of X ray examinations in the hospitals.

(5) The need of having good and reasonable standard of building premises and working space for an efficient discharging of the responsibilities of Radiographers.

(6) The need of having good and sufficient number of X ray machines to provide an efficient service to the public who is becoming more demanding each day.

(7) The necessity of having a proper legislation for Radiation protection with a view to enforce rules and regulations in the field of Radiation protection.

(8) The need for the Ministry of having a proper maintenance programme for the X ray equipment in the interests of the health services.

(9) The need for having an improved training / structure and course for the radiographers in order to cope with the new demands of the rapid technological changes in Radiology and Medicine.

(10) The necessity for the Ministry to strengthen the staffing structure of the emergency services to cope with the ever increasing workload.
(11) The need for having serious negotiations/consultations procedures at all levels of the Health institution in conjunction with the provision of the IRA 1973.

(12) The staff welfare (mess facilities; parking facilities, recreational structures, etc.) should be given priority of consideration in line with government’s policy.

**Enhanced Pension**

The Staff Side has submitted that the nature of the work has inherent occupational risks warranting an enhanced pension formula.

The Official Side has submitted that there is no evidence that the maximum permissible dose of radiation to which the members of Radiography staff are exposed has been exceeded. In line with the recommendation of the International Commission on Radiological Protection (I.C.R.P) no special privileges should be granted to radiation workers (Page 71 of the Manual on Radiation protection in hospital and General practice refers). Furthermore, the Basic Safety Standards, a manual inter alia of the IAEA and WHO recommends that there was no need to provide special treatment to radiation workers and this includes retirement benefits.

The Tribunal finds that what is important is that adequate protection measures should be available for radiographers and related categories of employees who are exposed to occupational hazards.

In view of the measures taken to provide adequate protection to radiographers (see below), the need for an enhanced pension does not arise. The Tribunal awards accordingly.

**Radiation Control**

The following has been agreed

(i) It is agreed that film badge and TLD are the two most popular devices although TLD is being encouraged by the IAEA especially in African countries.

(ii) It is now considered that the TLD is more sophisticated and reliable.

(iii) With this new method of control, monitoring will be on a more regular basis since there will be less postal delays. Results may be obtained almost immediately whereas with film badge, one has to wait for 2 months.

2. The Official Side has undertaken to have all new X-Ray equipment thoroughly checked before commissioning and that radiation surveys will be carried out according to recommendations in “Manual on Radiation Protection in Hospital and General Practice Vol. 3 - X-Ray Diagnosis”.

The Tribunal finds that Government has agreed to exercise adequate control and awards accordingly.

**Radiation Safety Officer**

The Staff Side has claimed that a Senior Officer be appointed as Radiation Safety Officer wherever appropriate.

The Ministry has submitted the following: -
In line with the recommendation contained at Page 58 of the Manual on Radiation Protection Basic Requirements and that at paragraph 14.9.86 of the PRB Report 1993, the radiation protection duties have been entrusted to the Principal Radiographer, an appropriate grade to look after this responsibility. The PRB has also taken into consideration these additional duties in fixing their salary.

In district hospitals where services of Principal Radiographers are not required it is proposed to entrust radiation protection duties to Senior Radiographers. The Radiography Staff have received proper guidance during their training as to the protection to be taken against ionising radiation. The Principal Hospital Physicist is among the tutors who give such training.

The Tribunal finds the Principal Hospital Physicist is the officer who should be in charge of all matters relating to radiation protection and Principal Radiographers have also been entrusted with radiation protection duties. The need to appoint a Radiation Safety Officer within each major X-Ray centre, as claimed is not justified and the Tribunal awards accordingly.

**Abuse of X-Ray examination**

The Ministry has rightly submitted that X-rays are done at the request of the Medical Staff who are in a better position to determine whether such examinations are warranted.

The Tribunal declines to intervene and awards accordingly.

**Building Premises/Equipment/Staff Welfare**

The Staff Side has submitted that some building premises do not provide adequate protection to the Staff, that there are not sufficient X ray equipment and that improvements in staff welfare are required.

The Ministry has submitted the following:

All equipment has been repaired or replaced at Dr. A. G. Jeetoo Hospital. The X Ray machine in the Casualty Section has been replaced by a new Picker Machine.

The X-Ray machine in the room was broken down beyond repair and has been taken out; the room is being used as office space and store.

Lead glass was not available at that time, but the windows were protected by mobile lead screens. Now both windows have been fitted with lead glass.

It is practically impossible to add any waiting room to the very old Casualty Department of the Dr. Jeetoo Hospital. However whenever new departments are constructed, provisions are made, as far as possible, to include space for waiting rooms.

The Casualty X-Ray room has been upgraded and windows are fitted with lead sheets. As for the door, the present fittings do not allow the bearing of the heavy weight of leaded doors. One should remember that the building was commissioned long ago. However provisions are made to protect the entrance with mobile lead screens.

The Tribunal finds that some of the premises where X-Ray equipment are handled are not spacious enough and cause inconvenience to operators and patients but they are located in old
buildings which are difficult to improve.

The Tribunal recommends that the Ministry should consider that whenever new equipment are installed, adequate space be provided for the comfort of both staff and patient. The Tribunal also recommends that adequate space be provided wherever possible to accommodate the Radiographer’s Department, including a mess room.

Legislation for radiation protection

The Radiation Protection Act 1992 (No.22 of 1992) was passed by the National Assembly on the 23rd June, 1992. It came into operation by Proclamation No.13 of 1992 on the 18th September, 1992. The Ministry has submitted that two regulations of very technical nature are being prepared. These are:

(i) The Radiation Protection (Standards) Regulations; and
(ii) The Radiation Protection (Licence to use sources of radiation) Regulations.

It has also submitted that -

The power to vary the composition of the Board rests with the National Assembly.

The Tribunal finds that necessary legislation has been enacted and declines to intervene. The Tribunal awards accordingly.

Medical Surveillance

The Ministry has undertaken to carry out medical surveillance on a yearly basis by a specialist doctor qualified in Occupational Medicine as recommended by ILO, IAEA and WHO (Vol. I of Manual on Radiation Protection - Page 71).

The Tribunal notes this undertaking of Government and awards accordingly.

Radiation Control (Quality Assurance)

The Ministry has submitted the following:

The Ministry of Health is collaborating with IAEA to implement quality assurance programme for all x-ray machines. The equipment has already been received and a proper programme is being prepared to carry out tests on all x-ray machines in the Ministry of Health. At present all new machines are fully tested before being commissioned. With the passage of time all x-ray machines will be tested.

The Tribunal is satisfied with the measures being taken and awards accordingly.

Staffing X-Ray Emergency Services, Training

The Staff Side has submitted that a proper manning of X-Ray Centres should be provided depending on the work load in each centre.

The Ministry has submitted the following:

. During normal working hours a team working in a Casualty X-Ray Room consists of:
(a) one Senior Radiographer

(b) two or three Radiographers

(c) two Radiographic Assistants

(d) one or two Attendants

With the present number of Senior Radiographers on the establishment of the main hospitals (Dr. A.G. Jeetoo, Victoria, SSRN and J. Nehru Hospitals) it is not possible to include a Senior Radiographer everyday in the team of Radiography Staff working after normal working hours on weekdays, Sundays and Public Holidays. However, depending on the number of Senior Radiographers posted to each hospital, every effort is made to include a Senior Radiographer among the staff working after normal working hours. Moreover, the workload in the X-Ray Department at night is not so heavy as during normal working hours. Should any problem crop up after normal working hours the Radiographers (in cases where no Senior Radiographers are available) could seek the advice of the Chief Radiographer or any Senior Radiographer working in the other hospitals.

The services of Hospital Attendants are made available to the Radiography Staff after Normal working hours.

The Radiographic Assistants have not been classified as shift or roster workers. They are working during normal office hours from Monday to Saturdays. There is no recommendation in the PRB Report to the effect that they should work after normal working hours like the Radiography Staff.

The Tribunal finds that proper manning of any department is not a static process as it depends on volume of work which may constantly change. This should best be left to management but there should be close consultation with the Union on such a matter. The Tribunal awards accordingly.

The Tribunal would like to draw attention to the fact that it is essential that training be an ongoing process in view of development taking place in this field.

**Negotiations / Consultations**

Staff Association or their work-place representatives should be authorised to carry out negotiations with Heads of Division on matters not requiring any policy decision and to which the Ministry has already agreed. The need for the Tribunal to intervene on specific issues does not arise and awards accordingly.

(H. Balgobin)
President

(N. Deerpalsing)
Assessor
27th October 1995

(P. Seejore)
Assessor