

Gordon Marriott Memorial Golf Day Raises over £11,200 for the Greater Manchester Asbestos Victim Support Group.



groups of 4. In total over 170 golfers took part. The day ended with an evening do at the Club House where over 250 people attended to support the family in their efforts.

A raffle and silent auction helped to increase the total raised.

Lorraine Creech attended on behalf of Mesothelioma UK and spoke about mesothelioma, what it is and its effects on the sufferer and their family.

Jeff Eaman spoke on behalf of the Support Group about the difference the donation would make to the group.

Chris Hazlehurst presented the golfing prizes including the wooden spoon for the worst golfer which was all taken in good spirits.

Despite the rain on the day, everyone taking part was happy to be there to

support such a worthy cause although the hot soup at the end was well earned especially by those playing in the morning when the rain was endless.

The Asbestos Law Partnership was proud to have been a main sponsor of this event, running the Half Way Hut and providing golfers with well-deserved hot drinks, pastries and chocolate. It was fascinating to speak to the various golfers who were taking part including Ron, a regular attendee at the Living Well With Mesothelioma Group Meeting in Manchester.

All credit though must go to Chris and Natalie Hazelhurst for organising such a fantastic event in memory of their much loved Gordon Marriott. Their tireless efforts on behalf of the support group to raise money to support their work is unbelievable.

On the 7th September 2018, the family of Gordon Marriott who tragically died of mesothelioma, ran a charity golf day at Blackley Golf Club to raise vital funds to support the GMAVSG.

The day started before 8am, with golfers turning up to take on the 18 hole course, teeing off at 10 minute intervals throughout the day in

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- * We have built our firm on the ethos that we will act ethically, fairly and in a socially responsible way. As part of this commitment, we donate 10% of our net annual profits to good causes including the John Pickering and Partners Charitable Trust.
- * We are prepared to take the financial risk of pursuing difficult cases that help to preserve and promote the rights of asbestos sufferers.
- * Unlike many other firms, we act exclusively for asbestos sufferers. We do not act for Defendants.
- * We have over 45 years experience and all our solicitors specialise in asbestos claims including mesothelioma and have specialist asbestos accreditation from APIL.
- * We have been involved in most of the important test cases relating to asbestos claims and have constantly fought to promote and preserve the rights of asbestos sufferers.



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ALP REVIEW

The Asbestos Law Partnership Newsletter

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Asbestos in the NHS?

Interview with Dr Jennifer Hoyle,
Consultant Respiratory Physician,
North Manchester General Hospital

What is your role at North Manchester General Hospital?

I am a Consultant and the Occupational Lung Disease Lead for what was previously part of the Pennine Acute NHS Trust now the Northern Care Alliance. On a day-to-day basis, I run clinics at the hospital, which are anything to do with work related breathing problems.

How many patients do you see a year with asbestos conditions and what area are they from?

I see approximately 400 patients per year, half of which are patients with asbestos related conditions. Those I see with asbestos conditions tend to

come from the local population around the hospital rather than being widespread. Each year there are approximately 50 new asbestos related referrals to the department, usually suffering from pleural plaques, pleural thickening or asbestosis. Some patients then come back for a review each year whilst others are discharged if the condition is stable.

Mesothelioma patients tend to go to the pleural clinic, which I assist with. The number of mesothelioma patients the Trust sees, varies each year. In the last few years it has been as many as 22 and as few as 10.

Is there a particular trade that you see more than



others?

Yes there are particular trades that we see more than others coming to the department.

The HSE also provides data by way of a list of trades by job title who develop asbestos conditions.

Joiners are one of the biggest groups that we see and we see a lot of them. Some patients know exactly where they were exposed to asbestos. Joiners tend to know about their exposure. However part of the problem in the construction industry is that some don't always know that they've been exposed and don't always know which products contain asbestos.

We also see a lot of plumbers, labourers and demolition workers.

What about non-traditional trades such as office workers, teachers, nurses?

If you keep an eye on professional magazines, there are obituaries from doctors who have died from mesothelioma. I've seen some teachers and nurses with mesothelioma too.

Other types of hospital workers are at risk of asbestos related diseases too including porters. I had an asbestosis case for a porter. They spent a lot of time around the boiler house where there would have been a lot of asbestos. They also spent a lot of time under ground in the basements and would throw snowballs at each other!

Maintenance department workers also come to my clinic with pleural thickening and occasionally asbestosis.

Have you seen any patients who have worked with asbestos in a hospital setting?

Yes I've seen porters and maintenance staff with asbestosis and mesothelioma. I've seen nurses, doctors and clerks with mesothelioma.

Maintenance staff have often stripped and removed asbestos lagging in older parts of the hospital..

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Do you think asbestos in hospitals is a problem and if so why?
Yes in certain situations but not always.

Asbestos is usually labelled. I have had experience where I have seen asbestos in poor condition and have reported this. It has then been dealt with.

I have seen workers working around labelled pipes and had to tell them what the label means. Thus contractors may not be so aware of the labels.

Where asbestos is in good condition it is safe.

A number of buildings have been sealed off in hospitals and then later demolished. The demolition work causes a risk of asbestos exposure.

I think one of the problems is that people don't know what asbestos looks like now. They don't know what to expect. They ignore the yellow triangles because they don't expect asbestos to look like boards

What do you think should be done about asbestos which is still in the hospital estates?

Things have improved greatly. There's a lot of anecdotal evidence about exposure 20, 30 and 40 years ago in hospitals. There is still going to be a legacy of staff who will develop asbestos conditions as a result.

All hospitals should have registers. A lot seem to have already done this. If asbestos is in good condition, then it's safe to leave it where it is but it needs monitoring. We need to make sure people are aware that it's there. It's kind of hidden now. We imported millions of tonnes of asbestos into the UK so it still has to be here somewhere but no one knows where it is. If the condition of the asbestos deteriorates then it needs to be removed

by experts.

If asbestos needs to be removed then outside contractors should be brought in. Hospitals have their own staff, but they would not be qualified to do this. Stripping asbestos needs to be done by a professional firm. One of the issues in hospitals is that there are a lot of buildings that have to be kept an eye on.

We need to make sure the Estates Departments are vigilant and aware of where it is.

Do you think it is still possible for people to be exposed to asbestos in hospitals today and who might be exposed? (Workers, staff, patients, visitors)

I think it's highly unlikely patients or visitors would be exposed to asbestos. It is possible workers could be though if they are doing a task and don't know it's asbestos or they go in to an area where they don't know asbestos is present. There is also a risk as more old buildings are demolished.

I am aware, that up to about 10 years ago there were records kept by some hospitals in the cellars, which staff would regularly go down and collect. The records were near asbestos lagged pipes. The records picked up dust from being down there over a number of years which those staff would be exposed to. These areas are now sealed off and you can't get access to those old records any more. You have to manage without them. It is highly unlikely that there was anything particularly relevant in them anyway because of their age. There are usually electronic records for most patients now.

Your experience is from NMGH but do you think it's the same across the country? Do you think pressures on NHS budgets is preventing it from being removed?

I'd expect all hospitals to have a register. Gradually society has become more aware about asbestosis. The HSE has issued guidance at different times, including guidance in the 1970s about certain levels of exposure that they thought was acceptable but now no exposure is acceptable. The NHS will be guided by the HSE.

I don't know if budgets would affect this. My experience is that when I reported asbestos to be in poor condition, it was fixed.

The pressure is more likely to be to do with having enough staff to be able to keep an eye on it and make sure that it's maintained in a good condition.

Do you think asbestos is a problem limited to the NHS or is it across the public sector?

Asbestos is a problem across the whole public sector. It is a problem in all public buildings that were built in a certain age where asbestos is present.

What do you think should be done about asbestos in buildings?

We need to educate people, but not scare them about asbestos.

If it's in good condition, leave it in place but monitor it. If it is in poor condition, it needs to be removed.

I'm not sure that putting it in a tip and burying it underground is the solution. It doesn't get rid of the problem. We have to know where the asbestos has been put. We need a better corporate and community memory and for asbestos removal firms to know where it is. It then needs to then be left there, rather than the land being used, for example being built on with the land ending up being dug up again, disturbing the asbestos which has been buried underneath.



Legal Round Up

First to Scotland, in **James Docherty's Executors v Secretary of State for Business Innovation and Skills** (2018) the UK government argued that the case should be dealt with in England rather than in Scotland. The reason for this was because compensation in this case would be lower in England. James Docherty had died of an asbestos related illness caused by exposure to asbestos dust at Scotts Shipyard in Greenock in the 1940's. He developed the illness whilst living in England. The court had to decide whether the 'crime scene' was England or Scotland. The exposure had all taken place in Scotland but the disease did not develop until James Docherty was living in England. Not surprisingly the Scottish Court of Session decided it was Scotland!

Sadly the issue of payment for the costs of immunotherapy continues to be contentious for some Defendants. In **Hague v BT Plc** (2018) Douglas Hague had settled his mesothelioma case with an agreement that BT would be responsible for the cost of immunotherapy. He underwent 7 cycles of pembrolizumab which was discontinued. Mr Hague's consultant then recommended a different form of immunotherapy - ipilimumab and nivolumab. BT refused to pay for this on the basis that the agreement to pay for

otherapy only provided for payment of second line immunotherapy and did not provide for the payment of what they said was third line treatment which in any event was unreasonable. The court gave BT short shrift and ordered BT to pay for the treatment. The case highlights the legal arguments that some Defendants are still prepared to run and the need to ensure very careful drafting of orders settling mesothelioma cases. Hopefully this case will act as a deterrent against Defendant's running this type of argument.

On a less positive note the mesothelioma case of **Hawkes v Warmex Ltd** (2018) was lost on the basis that the claimant was unable to prove that the inner lining of the electric blankets she was employed to make were made from asbestos. Helen Hawkes and a work colleague both thought that the linings were made from a fluffy material asbestos. The Judge however did not consider that this evidence was consistent with contemporaneous documents in particular patent documents and rejected the witness evidence. The case shows the extent to which a mesothelioma victim's honestly held belief is likely to be subject to detailed forensic examination particularly where the asbestos exposure is not to a well known source.

ayground like strands, collecting in heaps on the ground where unsuspecting school children made snowballs to throw at each other playfully.

Allan caught a bus to Hebden Bridge to watch a film at the Picture House. He would catch the bus from outside Acre Mill, standing and huddling with his brother or friends under the extractor fan that spouted asbestos waste into the air. Allan walked to school with his brother and on cold winter mornings

they would try and get warm under the fan.

He would go into the post office to spend his money which mill workers also visited, leaving asbestos debris and dust behind.

However the unusual feature in Allan's case was that he visited Acre Mill between the ages of 10 and 12 on a regular basis to pass messages to his relatives. Allan's aunt, Ella, worked for Cape as a spinner. Soon enough other aunts joined the family in



The John Pickering and Partners Charity

The charity has recently donated £1,850 to the Greater Manchester Asbestos Victim Support Group to fund their 'Living Well with Mesothelioma Group.'

The group meets once a month in Manchester City Centre at The Central Hall on Oldham St. It is a collaboration between the support group and Mesothelioma UK. It provides support to those diagnosed with Mesothelioma and their carers. Different speakers attend each month to discuss a topic of interest to sufferers and to provide advice.

In recent months there have been talks from Mavis Nye, Dr Paul Taylor, a Consultant Oncologist and even a Tai Chi lesson.

Mesothelioma sufferers and their families also have the opportunity to chat together and learn from each other's experiences.

Graham Dring and Caroline Bedale of the Greater Manchester Asbestos Victim Support Group said "The donation of £1,850 from the John Pickering and Partners Charitable Trust to the Living Well with Mesothelioma Group will be of immense benefit to the group. It will enable the group to continue to meet for at least another year, paying for the room hire and refreshments and will make a contribution to the twice yearly group outings. The LWwMG is run jointly by GMAVSG and the Mesothelioma UK Clinical Nurse Specialist at Wythenshawe Hospital. As she has said, patients and carers feel that the group has contributed to a positive experience and it assists them to cope with the impact of diagnosis, treatment and ongoing care of this horrible disease which not only has a high symptom burden but also causes severe psychological distress. GMAVSG is proud to have established and supported this group, and is very grateful to the John Pickering and Partners Charitable Trust for making this donation which will help it to continue."



Old Town and started working for Cape too along with their partners. Allan's three aunts worked as spinners. He recalled his uncles working in different parts of the factory including the warehouse and pipe making department.

Understandably, Allan couldn't describe in detail the processes that went on in the factory being only 10-12 years old at the time but he did have a vivid recollection of pipes being made, loaded on a trolley and being put in ovens.

Allan would have been exposed to substantial amounts of asbestos dust produced by the manufacturing process.

Allan's case settled without having to go to court because his solicitor, Fozia, had years previously acted in a very similar case against Cape and succeeded. Tragically, that case was for a former Old Town Primary class mate of Allan's.

Cape Asbestos Acre Mill: Exposure as a child leads to mesothelioma



Allan Harris of West Yorkshire was diagnosed with mesothelioma, an asbestos related cancer, in November 2017. As is usual, his doctors asked him about his work history but Allan could not remember being exposed to asbestos in any of his jobs. The only contact he could recall with asbestos was from Cape's Asbestos Factory, Acre Mill, in Hebden Bridge.

With the help of Fozia

Hussain, Allan's case settled for a six figure amount without issuing court proceedings.

Allan, his mother and brother moved to the village of Old Town above Hebden Bridge in Spring 1948 when Allan was just a little boy. The family were invited to Old Town by Allan's maternal aunt, Ella, who worked for Cape as a spinner.

Allan's exposure to asbestos was typical of many children who lived in the area during that period.

Allan attended Old Town Primary School. He would play in the playground a short distance away from the factory's main drive where lorries laden with asbestos materials and waste drove by. Asbestos fibres floated about in the air, clinging to the wire netting surrounding the pl-

