

The Control of Lead at Work Regulations (2002) – review of lead in blood levels and associated guidance

British Society of Master Glass Painters Consultation Response, 7 June 2026

Our members are practitioners (self-employed, employees, and hobbyists), business owners, historians, conservators and anyone with an interest in stained glass. We have 448 current members in England, Scotland and Wales.

Question 1: To what extent do you agree or disagree that the blood-lead levels within CLAW 2002 should be reduced?

Response: Agree

We welcome the HSE review. We agree that, where necessary and where based on all-encompassing scientific evidence, our members should aim to reduce their blood lead levels to a level that safeguards health. However, we are seriously concerned that the proposed lower limits and time frames are not viable.

As the professional body representing all aspects of the craft of glass painting/stained glass we are deeply concerned about the consequences of the proposed changes on the conservation and future protection of our nation's highly significant stained-glass heritage. Moreover, the proposed changes would limit the possibility of that heritage continuing through the creation of new stained-glass windows. We are apprehensive that implementing the measures necessary to meet the proposed blood lead levels will force businesses to close.

The craft attracts a high number of women and the proposed changes would constrict the activity of those already employed and reduce opportunities for those seeking to enter it.

The proposed changes are highly discriminatory against women.

We would support an updated approach that continues to prioritise health while also ensuring that any proposals are practical, proportionate, and mindful of the historic practice of stained glass of which lead is an essential component.

Question 2: To what extent do you agree or disagree with lowering the general employee category blood-lead levels from October 2027? (action level to 20 µg/dL and the suspension level to 30 µg/dL)

Response: Strongly disagree

Glass painting/stained glass is an ancient craft. Lead is a traditional component of a stained-glass window: pieces of glass are joined together using lead 'comes' and it is also present in glass paint, solder and lead-light cement. Exposure to lead cannot, therefore, be avoided in either the conservation of historic stained glass windows or the creation of new ones using traditional methods.

The proposed action and suspension levels from October 2027 may be unrealistic and impracticable. We recently asked our members across England, Scotland and Wales who have worked with lead to complete a survey. We have 109 responses. Of these, 42 were willing to share their lead-level results and only three of the respondents had levels over 20ug/dl (highest reported level was 25 in our limited survey). However, the craft cannot afford to lose a single experienced practitioner since it is already on the Endangered List of Heritage Crafts.

Exposure to lead cannot be eliminated if the ancient craft is to survive.

Question 3: To what extent do you agree or disagree with lowering the general employee category blood-lead levels further from October 2029? (action level to 10 µg/dL and the suspension level to 15 µg/dL)

Response: Strongly disagree

We strongly disagree with the proposed levels.

We strongly disagree with the proposed action and suspension levels for general employees from 2029 without more accurate data as guidance, especially the background blood lead levels within the general population.

We recently asked our members across the UK who have worked with lead to complete a survey and received 109 responses of both genders. Of the 42 who were willing to supply their blood lead level results we found that 11 members had levels between 10-14.9 ug/dl and 10 members were above 15 ug/dl, even with control measures in place. This means that in our small survey 10 craftspeople could soon be unemployable.

We strongly disagree with the time frame of October 2029 to implement the new levels. Only 10% of our survey respondents felt confident about reaching the new levels in time. This is placing considerable stress on our members.

Question 5: To what extent do you agree or disagree with lowering the blood-lead action and suspension levels for women of reproductive capacity within CLAW 2002 from October 2027? (action level to 5 µg/dL and the suspension level to 7.5 µg/dL)

Response: Strongly disagree

Without sufficient evidence of the background blood lead levels in the general population, the proposed blood lead level action and suspension levels may be unrealistic. Around 80% of those who responded to our survey were women and, of these, 27% were WRC. The reported blood lead levels of participants overall showed that only 7 out of 42 respondents had levels below 5ug/dl. Of the WRC, 9 fell into the action category and 6 into the suspension category. We advocate strongly that it is unfair, even archaic, to discriminate against WRC and that women who are not pregnant, breast-feeding or planning a family have the right to make informed choices regarding the health risks associated with their chosen profession.

We believe that imposing such substantial reductions for WRC could conflict with the provisions of the Equality Act 2010.

Lead cannot be removed from the traditional craft of glass painting/stained glass and, therefore, exposure cannot be reduced without removing WRC from key craft processes. This would return women to secondary roles within the craft. Moreover, many of our members are WRC working alone and necessarily performing all craft process.

There is some evidence that the threat of the proposed changes is already having an impact upon the future viability of WRC joining the craft. Of the six apprentices on the recently formed stained-glass apprenticeship at University of Wales Trinity St David, only one is a WRC. We know there is interest from WRCs to join the apprenticeship, but they need to find a studio willing to risk employing them.

Question 7: Do you agree or disagree that the long-service

employee concession level should be ended by 1st October 2034?

Response: Strongly disagree

We do not support the removal of the long-service concession.

In our survey, 84 of our members have been working with lead for over 10 years. Of the 84, 41 have working with lead for over thirty years. Many of the 41 have recorded remaining safely within the existing HSE guidelines for blood lead levels since their introduction. The highest level reported to us was 25ug/dl. Around half the respondents reported their tests had stayed about the same, and 27% said they had fluctuated. This indicates that being able to reduce their blood lead levels so severely would be challenging, if not impossible.

Removing the long-service concession would lead to the exclusion of highly skilled and experienced practitioners from the workforce, despite their proven ability to work safely under established control measures. This will have a significant impact within the heritage sector where the retention of experience, skill and knowledge is critical to instructing and inspiring the next generation.

We advocate for retaining some form of flexibility or concession for long-service workers, recognising cumulative exposure and, also, taking into account background blood lead levels in the general population.

Question 8: Are there any unintended consequences which you think may result from reducing the blood-lead levels in CLAW 2002?

Response: Yes

In 2023 Historic Stained-Glass Window Making was added to the Red List of Endangered Crafts at our instigation. The inclusion recognised the closure of college courses, scarcity of training and employment opportunities, loss of skills and ageing practitioners. The new HSE regulations would be a further threat to the craft.

Even in larger studios where robust control measures and good practice are in place, many workers would be unable to meet the proposed limits. These larger studios are the ones able to offer placements to emerging stained-glass craftspeople through the Worshipful Company of Glaziers, Heritage Crafts and our own Society's endeavours.

More than half of our members are self-employed and 50 of those who responded to the survey said they would be significantly impacted citing the danger of being forced to stop practicing or their business becoming unviable due to extra costs. These studios can be sole traders or rely on a small number of highly skilled professionals working across a wide range of roles. Small studios do not have the resources to redistribute tasks. As a result, any requirements that restrict individuals from carrying out core tasks such as painting, leading, soldering, dismantling old panels and cementing, will directly affect the studio's viability. Beyond the immediate financial implications, there would be an emotional toll; working with stained glass is more than a job, it is often a passion. Our members have invested time and money in education, materials, tools and studios.

In the age of AI, stained glass offers people of all ages and backgrounds a vibrant career that cannot be replicated by machine. In our survey of 109 members, 56 of our respondents reported teaching stained-glass skills. The new restrictions may discourage teachers from offering classes and potential students

from taking them. Stained glass is often first encountered in adult education or 'experience days'. The new restrictions could discourage institutions from offering courses.

We have a long tradition of artist-makers in the UK. In our survey, 98 members reported making new work. The costs of working with stained glass are already high and complying with the new regulations will bring additional costs. This will present further threats to an already endangered heritage craft.

We need skilled workers to maintain our stained-glass heritage. If implemented, the new regulations could be perceived as an existential threat to the built heritage and cultural identity.

Question 9: Are there any workers with particular characteristics (age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, etc.) you believe will be disproportionately impacted by the proposed changes in CLAW 2002?

Response: Yes

Women would be disproportionately impacted by the proposals. Exposure to lead cannot be avoided within the craft of glass painting/stained glass. Despite working in accordance with established good practice, WRC would be actively prevented from working with lead. In effect, they would be marginalised within their chosen profession. This would go against workforce diversity and inclusivity. The implication is that when applying for jobs women would be automatically be discriminated against until they no longer qualify as WRC.

The proposals also raise questions for employers around job applications and interviews. In order to establish if someone is a WRC they would be forced to ask for age, gender identity, and medical records. We believe this will be unfair to the applicant and

the employer.

Question 10: Provide any further final comments on the CLAW 2002 proposals below – many thanks.

Glass painting/stained glass is an ancient craft from which the use of lead cannot be removed. We encourage HSE to consider the wider heritage implications of the threat to the craft and introduce sufficient flexibility to safeguard its future.

If the proposals go ahead we would like to see financial support to assist with the additional cost of implementing necessary changes such as additional blood tests, equipment, enhanced PPE etc. Workers who exceed the proposed targets and are suspended will also need support, including emotional support and retraining to mitigate the loss of income they will suffer if they have to start again in a new profession. The studios forced to suspend workers will also need compensation if they are to survive.

While we recognise and endorse the need to protect all those working with lead from the harmful effects of exposure, we also ask for more research, especially into background blood lead levels within the general population.

Meanwhile, we are happy to help educate the community around best practice through our website and other channels.

Question 50: We currently estimate that a blood test for lead costs around £40. Do you think this estimate is about right, in your experience?

Only two members reported paying around £40. We also had reports of £80, £100, £120 and £160