

# SUBMISSION

### **Consultation Regulation Impact Statement:**

#### Managing the risks of respirable crystalline silica at work

#### Instructions

To complete this online submission:

- Download and save this submission document to your computer.
- Use the saved version to enter your responses under each question below. These
  questions are from the <u>Consultation Regulation Impact Statement on managing the
  risks of respirable crystalline silica at work.</u>
- Once you have completed your submission, save it and upload it using the upload your submission link on the <u>Engage submission form</u>.

Submissions will be accepted until 11.59 pm on 15 August 2022.

#### Additional documentation

Up to three additional documents can also be uploaded when you submit your response. Relevant documents to upload could include cover letters or reports with data and evidence supporting your views.

#### Help

If you are experiencing difficulties making your submission online, please contact us at <u>occhygiene@swa.gov.au</u>.

Respondents may choose how their submission is published on the Safe Work Australia website by choosing from the following options:

- submission published
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Please note the following are unlikely to be published:

- submissions containing defamatory material, and
- submissions containing views or information identifying parties involved in hearings or inquests which are currently in progress.

#### Your details

(Please leave blank if you wish to remain anonymous)

- 1. Name or organisation
- 2. Email used to log into Engage

#### Questionnaire

(Consultation RIS questions)

#### Statement of the problem (Chapter 2)

### 2.1 Do you agree with the identified problem? Has the entirety of the problem been identified? Please provide evidence to support your position.

I agree with the identified problem. I am satisfied that the entirety of the problem (the range) has been identified but it may not be fully clear yet to the extent of the problem and which workers are most likely to be effected. There needs to be more information around the number of workers in construction who have suffered lung damage due to exposure to RCS and in which areas of construction (civil, commercial, industrial or residential) they have worked in to suffer the effects. If the numbers are insignificant compared to those working with engineered stone and the like, this should be a sign it is being managed effectively already. It doesn't mean we can't do better but a 'one size fits all' approach may not work as anticipated.

### 2.2 Do you have further information, analysis or data that will help measure the impact of the problem identified?

I have no extra data or analysis but I would like there to be a tool where the '*likelihood*' of creating unsafe levels of RCS dust are tabled to aid analysis on a case by case basis.

#### Why is Government action needed? (Chapter 3)

### 3.1 Do you agree with the case for government intervention? Please provide evidence to support your position.

Yes government intervention is necessary to set clear and unambiguous guidelines as to how to safely work with products that may contain RCS that may be emitted at dangerous levels.

### 3.2 Do you agree with the objectives of government intervention? Please provide evidence to support your position.

I agree with the objectives of government intervention. Without government intervention no clear guidelines will be set and therefore it will be unclear how to manage the risk of RCS. Evidence of this is the rate of injury and accidents that have steadily declined as WH+S laws and regulations have, over time, set the expectations and understanding as to what a safe system of work should be and therefore the implementation by both workers and employers of systems designed to prevent or minimise risk of harm at work.

#### What policy options are being considered? (Chapter 4)

#### 4.1 Do these options address the problem? Please provide evidence to support your position.

Of the various options, implementation of a COP (already in place in Qld) managing risks from engineered stone is imperative because it is the industry where the absolute majority of the risk is (and where the absolute majority of cases are). Option 2 to increase awareness is also important. Option 3 to clarify the existing requirements is very important to give certainty as to how to identify the hazard, assess the risk and put control measures in place. However, this clarification must not have blanket measures that compare apples with oranges. For example, in civil construction where we conduct the majority of our work, 99.9% of our activities are out in the open air. As it is near impossible to get an accurate reading by air monitoring of the presence of RCS dust, the proposal to monitor must not be a blanket ruling. Nor should health monitoring be mandatory unless the exposure to RCS fits the criteria of regular, high levels of exposure. Similarly, fit testing of respirators should not be a requirement unless the works to be carried out match the criteria where health surveillance is required. Some protection is better than none and (as an example) the occasional drilling of masonry anchors into formwork on a slab out in the open air should be carried out with a respirator. But finding a clean shaven building worker is rarer than rocking horse manure. Unless the government commits to an extensive trial of air monitoring in the open air, there will be no evidence of RCS being created at harmful levels. If there is evidence, we have to control it but otherwise we're going to be burdened with expensive, near impossible measures to implement based on guesswork. Similarly, treating all works with concrete and masonry products that involve power tools as high risk silica processes creates a nightmare of regulatory and procedural burdens that will never be adhered to fully across the industry because it's near impossible to comply. Until the government carries out rigorous field testing of the occasional use of power tools out in the open, it will be impossible to get any worker to buy into the idea they have to turn up clean shaven every day, just in case they have to use a respirator. Finally, treating crystalline silica dust processes in a similar way to those that exist for Asbestos is another near impossible ask. Exactly how many disposable overalls, masks, bags etc. do you think you'll go through in construction in a year?

### 4.2 Are there any other non-regulatory or regulatory options you think should be considered to address the problem?

A risk assessment should always be carried out but as I alluded to earlier, a guideline as to the *likelihood* of RCS being created at harmful levels that are *likely* to enter a worker's breathing

zone should be part of any COP. It doesn't need a new COP. The engineered stone COP can be adapted to cover all crystalline silica containing materials (CSC). While the bulk of the COP should remain dedicated to engineered stone, the remainder can set out in detail, which activities in which industries require control measures and when they apply. What applies in a tunnel is not the same as inside a building though it may be similar in cases, quantities and durations of dust creating activities will differ. A multi-storey building where floors are yet to be enclosed will differ from work in a basement car park. Similarly a quarry is different again to a civil construction site. Both open, but both creating dust at vastly differing amounts. Unless there's a tool or table, how will people make an accurate assessment as to what measures need to be used? Ramping up from a basic risk assessment and donning a respirator for a minor task, to a SWMS to a Dust Control Plan, to air monitoring, to health monitoring can be extremely expensive and near impossible to implement unless there's quality research and information to call on to make the judgment.

#### What is the likely impact of each option? (Chapter 6)

6.1 Is the cost modelling methodology appropriate to estimate the costs to industry and governments (Appendix D)? Please provide evidence to support your position.

I have no expertise in this area.

6.2 Are the estimates of the number of businesses covered by each of the regulatory and nonregulatory options accurate? Please provide evidence to support your position.

I have no opinion on this.

### 6.3 Are there other factors that should be considered in the assessment of the effectiveness of each option (Section 6.5)? Please provide evidence to support your position.

As always, when risk assessments are made the *'likelihood'* of a hazard materialising into high risk to a worker must be considered. Too often, it is overlooked. For instance, what is an obvious high risk (dry cutting and grinding of engineered stone which contains 90% silica and working in a closed environment) versus the occasional drilling, jackhammering or scabbling of concrete (always with dust control) out in the open air.

## 6.4 Are the cost and other estimates (including worker wage assumptions) listed in Appendix D accurate and appropriate? If not, please provide additional data to support a more accurate estimate of costs.

I have no expertise in this area.

### 6.5 Do you have further information regarding the costs to the public health system for silicosis and silica related diseases?

I have no expertise in this area.

#### **Discussion of options (Chapter 7)**

## 7.1 Which option or combination of the options presented is most likely to address the identified problem? Please provide evidence to support your position.

Option 2 on creating awareness will play an important role and should not be readily dismissed. If you're going to change people's behaviour, you have to make them aware of why they should change. Option 3 I believe I have already answered. I support clarification but I don't support the lazy option of blanket rules and comparing apples with oranges. It's all very well creating a regulation and a COP that appears to have workers safety as its key consideration but if it's impossible to implement, what is the point of it? As another example, we have an upcoming project of drilling holes into concrete overhead. I've already told the guy likely to carry out the task that he'll need to be clean shaven every day and I'll fit test his respirator before we carry out the task using dust extraction tools. I'll also be wearing a respirator and no others will be allowed in the area while we carry out the works. So horses for courses. We're not going to use an air monitor or send him off for health monitoring because it is a task of short duration per day over a few days. Make a blanket rule and every job will become an enormously costly and complicated task that no government department will ever be able to implement effectively.

## 7.2 Are there any significant barriers to implementation of the options presented? What are those barriers? Is there a cost associated with them? How could they be overcome?

Again I think I've already answered this. Make it too broad, too all-encompassing and it will be impossible to explain, impossible to understand or to convince people of the merits of it. It will also be costly particularly as I said before in terms of treating silica like asbestos and the increased equipment and monitoring required even for tasks of short duration.

#### Other comment

#### Do you have anything further you would like to add as part of this process?

I think I've said all I have to say. There needs to be much more consultation on this. We have to get it right but it has to be based on hard evidence, reliable data and critical research. In the engineered stone industry, governments have acted swiftly after the event and introduced stringent rules to protect workers and rightly so. But to now take a one size fits all model and apply it to all industries where silica is present and can be released is not the right approach in my view without a comprehensive study and numerous field trials. Don't tell us, show us.