



Occupational Health Society of Australia (WA)

New leaders appointed to head the Society

At the Annual General Meeting of the Occupational Health Society of Australia (WA), held on 4 April, the following members were elected to the respective Offices and Committee:

President	David Lampard
Vice President	Dr Janis Jansz
Joint Secretaries	Allaine Coleman / Sheryl Kelly
Treasurer	Bronte Weekes
Committee	Lee Cherry Ross Graham Peter Nicholls Hannah Riley Sam Tsakisiris Les Vogiatzakis Dr Kar Char Wan

The following items were identified for consideration by the incoming officers and committee members in the forthcoming year:

- a response to the National Review of the Model OHS laws
- the draft WA Code of Practice for FIFO workers
- the monitoring of the health of workers under the proposed Model OHS Act. This item was recognised as a priority issue for the Society.

Members should also note the change of contact details for the Society.

- Email: ohswa@outlook.com.au
- Address: c/- Secretary, OHSA(WA), 639 Murray St, West Perth, 6005

This issue of the Monitor is the final under the banner of the outgoing Committee.
Please contact the incoming Secretariat on ohswa@outlook.com.au regarding future editorial or membership matters.

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MONITOR EDITOR
Professor Geoff Taylor



Legislative/regulatory matters

New Bill being drafted to modernise workers' compensation

The McGowan Government has approved the drafting of a new workers' compensation statute.

The Workers' Compensation and Injury Management Act 1981 is outdated, complex and fails to provide sufficient clarity on fundamental aspects of the scheme.

It will be replaced with a modern Act that is clear, accessible and workable.

The Bill will implement lifetime care and support arrangements for catastrophically injured workers, delivering on a commitment between the Commonwealth, and State and Territory governments.

Public consultation will occur on a draft Bill before it is introduced into State Parliament.

Source: Media Statement, Hon B Johnston MLA, 15 February 2018

Senate committee to look into industrial deaths

The Education and Employment References Committee has been directed to inquire into whether the limited harmonisation of WHS laws and the increasing use of temporary workers are hampering the prevention of workplace deaths. Federal Labor Senator Anne Urquhart this week moved for the Senate committee to conduct an inquiry into the "framework surrounding the prevention, investigation and prosecution of industrial deaths in Australia".

The committee will consider:

- the effectiveness and extent of the harmonisation of workplace safety legislation between the states, territories and Commonwealth;
- jurisdictional issues where safety investigations cross state and territory borders;
- issues relating to the chains of responsibility between the jurisdictions;
- safety implications resulting from the increased use of temporary and labour-hire workers;
- the roles of employers and unions in creating safety cultures;
- the effectiveness of penalties for offences relating to serious incidents like fatalities; and
- any other related matters.

The Committee is due to report by September 20, 2018.

Source: OHS Reps Safety Journal, 20 March 2018



SAFETY

Inaugural Meeting

West Australian mining contractors and guests.

Front Row L-R: Bob Halse (Monadelphous), Catherine Stedman (DOMEWA), Sue Murphy (Clough), Greg Harris (ELTIN), Bruce Anderson (Henry and Walkers).

Back Row L-R: John Lemon (TEC), Ralph Hayes (Boral), Arthur Baker (Roche), Wally Gelok (Clough), Doug Rogers (AWP), Kim Sutton (Brandrill), Graham Harford (McMahon), Ivan Gurney (Thiess), Roger Hampson (DOMEWA), Terry Robinson (Charles Hull).

Absent: Tery Candiadero (JR Engineering), Kim Sweet (TAFE).

The Mining and Resource Contractors Safety Training Association (MARCSTA)

By Professor Geoff Taylor, Editor

In April this year MARCSTA was officially wound up, after 22 years contributing to mining safety and health not just in WA but elsewhere too.

In 1997 the inaugural MARCSTA chair **Greg Harris** from BGC Contracting described how it was formed when contract mining OHS managers agreed that "continual re-induction of our mining workforce was a waste of time, money and effort. Many induction standards were low, there was no uniformity and no methods of measuring the effectiveness of the process". By mid-1997 there were 47 MARCSTA training providers, all of whom had to have five years' experience in the mining industry.

One was **Joe Maglizza**, who years on, was to become MARCSTA and later OH Society chair. Another was **Tony Aveling**, who over time built what became the biggest business with its origins in MARCSTA inductions. Site specific inductions were intended to be modified to

dovetail with the course, an issue that was never fully understood in some quarters.

Also by 1997 **Catherine Stedman**, who had originally kicked the contractors into action, was editing the newsletter, *The Monitor*, and **Pat Gilroy** from the Chamber of Minerals and Energy and **Jim Torlach** the State Mining Engineer both wrote messages of support. **Irene Ioannakis**, a training and development expert with links to ECU, was the independent assessor of providers. **Bob Halse** (from Monadelphous) and **Carole** his wife provided the secretariat, and there were 23 member companies. Providers' workshops started that year and were a regular feature.

A facilitator's guide and assessment material were created. **Terry Condipodoro** and **Ross Graham** started many years on the committee then. The General Induction Manual resulted from taking the best from about 200 other manuals. Passing the course yielded a passport valid for two years.

In late 1997 two CSR divisions adopted MARCSTA and CSR's **Vic Roberts** became chair of the MARCSTA training committee. **Geoff Taylor** became Monitor editor in 1998 after Catherine's untimely death. In 1998 **Tom Bateman** and **Alan Chester** had just run two surface and two MARCSTA underground inductions at Beaconsfield in Tasmania. MARCSTA courses were later to be run in NSW, NT, Queensland (started by

Sharyn McCulloch), China and by **Vlad Doguilev** in central Asia. Four hour refreshers were introduced in 1999 for those with expiring passports, and the MARCSTA office moved to Technology Park staffed by **Anna Verteramo**. That year Pat Gilroy became CEO of MARCSTA, and he drove it forward for fifteen years. By 1999 42% of all those working in the Australian mining industry (37,500 people) had taken a MARCSTA induction with 70% of sites recognising the training. By early 2000 all providers also needed to hold a Certificate IV in Workplace Training and Assessment, and that year MARCSTA achieved quality endorsed training organisation (QETO) status. Associate membership was offered to companies serving MARCSTA members on site. **Bob Fahey** had MARCSTA certification accepted at a mine in Chile in place of a US MSHA course.

MARCSTA also honoured Catherine Stedman with an award for trainer of the year, and in 2005 it went to **Ray Hargreaves** and **Darren Ridley**, who had both trained 10,000 inductees.

In 2001 a risk management course from the national mining package was introduced, and progressively OHS for managers and supervisors, and the national construction safety induction module, with crossover recognition between this and the mining induction. Trainers required specific qualification to deliver these courses. Trainers were supported with pictorial material taken specifically for risk assessment.

MARCSTA facilitated the setting up of a chapter of the International Society of Mine Safety Professionals, and by 2002, 27 had qualified before it was abandoned due to external problems. 2002 also saw a move to align the MARCSTA competencies with the relevant unit of the national Metalliferous Mining Training Package. Statements of attendance could then be followed up by workplace statements of attainment. This was also the year that Pat received the Order of Australia for his work in mining industry safety and health, comment on the Mine Safety and Health Act review was given to the Laing inquiry, and at the end of the year **Shannon Dickey** received a certificate from the Mines Minister as the 100,000th MARCSTA inductee. MARCSTA also contributed to the later Kenner inquiry into the Act.

A unit in Managing a Shiftwork Lifestyle was introduced based on an agreement with Circadian Technologies in the US, and trainers were specifically accredited to deliver it.

With the advice of people such as **Barry Chesson** of Alcoa, the manual supplied to each trainee received frequent updates. For the MARCSTA induction, Powerpoint visual aids were developed. A system of unannounced audits of courses for quality control was introduced, and several successful seminars on specific topics, open to anyone, were run.

In 2006 Jim Torlach passed away and in 2007 a scholarship fund in his name was set up to pay all fees for the Curtin University course in OHS for one student

per year. The first student was **Cassandra Prideaux**, and a number have followed her.

In 2007 **Fan Yunxiao**, a visiting Chinese professor of safety management, undertook the course. In December 2008, **Bill Gosling** of GR Engineering became the 200,000th inductee.

In 2008 **Sheryl Henley** was appointed as training manager.

Dr Ian Douglas made the effectiveness of MARCSTA induction the subject of his PhD research at ECU and the findings were favourable.

Geoff became reviewing editor of The Monitor from 2009-18, with Pat and **Paula Sinclair** selecting the content and moving to more pictorial impact, when The Monitor moved from print to electronic format.

By 2014 many principal companies had moved back to company specific inductions, rather than dovetailing specific inductions with the MARCSTA general induction. MARCSTA ceased operating. Pat then moved to four years rejuvenating the OH Society, originally started in 1977.

Great credit must go to Pat Gilroy for his work with MARCSTA over 15 years and latterly with the Occupational Health Society of Australia (WA), as well as to Paula Sinclair. We wish them well now that they have retired from working for both organisations. Credit too to all those providers who spent many long days contributing to better safety and health in the workplace.

We apologise to anyone who feels that they should have been specifically included in this brief review.

The value of MARCSTA

A set of incident reports in a recent Resources Safety Matters magazine showed that an important factor seemed to be a poor or missing JSA, or ignoring one, in 11 out of 14 cases. This was one key aspect of a MARCSTA induction.

MARCSTA's uniform approach to high standard inductions has now fallen out of favour. We seem to have circled back 20 or more years to a situation where once again people have to attend a mine safety induction for every company they work for or service.

*Right:
Professor Geoff Taylor,
Monitor Editor*



SAFETY

ACCI reiterates its warning about ISO 45001

The Australian Chamber of Commerce and Industry (ACCI) has reiterated its warning concerning the implementation of ISO45001 published recently.

“Given the number of issues we have identified, we don’t believe that it is possible at this point in time for Australia to adopt it”, said ACCI work health and safety associate director, Jennifer Low.

Last year ACCI warned that components of the draft international standard appeared to be inconsistent with Australian laws, and adopting it could result in non-compliance with, for example, the 2016 Building Code.

Low said that Standards Australia “hasn’t yet had the opportunity to evaluate the final version of ISO45001 against the existing AS4801 Standard and within the context of our legislative and Business environment.

Source: OHS Alert, 12 March 2018

CAMBODIA: UNION ACTION CALL AFTER WORKPLACE FAINTINGS RISE

Unions in Cambodia have called for more government action to protect workers’ health, after latest figures showed a sharp rise in the number of garment workers fainting at work. The National Social Security Fund (NSSF) of the Ministry of Labour said more than 1,600 workers fainted in 22 factories in 2017, an increase of more than 400 on the previous year.

The director of NSSF, Ouk Samvithya, called on all factories to regularly inspect and maintain ventilation systems one hour before the workers enter the building and ensure the management of chemical smells inside and outside the building. In addition, goods inside the factory must be stored in a manner not blocking ventilation, thermostats must be installed, infirmaries and emergency facilities must be prepared, and steam systems must be up to code.

NSSF said the cause of the faintings included chemical and psychosocial problems and poor ventilation in the workplace. Other contributory factors included irregular consumption of food and too much work. Fa Saly, president of the National Trade Union Confederation, commented: “The government should thoroughly examine the fabric and surrounding environmental issues, especially the heat because it has gotten hot recently making it difficult for workers.” He added: “Another thing is food. They are still eating insufficient food because wages are limited, which puts them at risk of fainting.”

Source: TUC Risks 837, 17 February 2018

Pic: Garment factory workers receive treatment at the Khmer-Soviet Friendship Hospital in Phnom Penh





Pic: Between June 2015 and July 2017, formal investigations were held into more than 40 mishaps at specialist laboratories. Photograph: Getty Images

Occupational health risks in UK laboratories

Safety breaches at UK laboratories that handle harmful bacteria, viruses and fungi have spread infections to staff and exposed others to potentially lethal diseases, The Guardian has reported.

The paper says the Health and Safety Executive (HSE) has investigated a series of mistakes over the past two years that led to scientists falling ill at specialist labs run by hospitals, private companies, and even Public Health England (PHE), the government agency charged with protecting and improving the nation's health and well-being.

One scientist at a PHE laboratory became sick after contracting Shigella, a highly contagious bacterial infection that causes most cases of dysentery in Britain.

The incident led the HSE to send the agency an enforcement letter to improve its health and safety practices.

Source: TUC Risks 837, 17 February 2018

China proposes abolition of work safety body

As part of a wide-ranging reform of China's government and administrative structure of the National People's Congress in Beijing, the government has proposed getting rid of the State Administration of Work Safety and merging its functions into a new national Emergency Management Department.

The new department, under the State Council, will also absorb the disaster management responsibilities currently under the Ministries of Civil Affairs, Agriculture, Water Resources, Land and Resources, as well the departments responsible for earthquake, drought and flood relief.

The move seems to confirm the suspicion that, on the issue of workplace safety, the Chinese government is more concerned with disaster management and control rather than preventing workplace accidents in the workplace.

Source: New York Times, Confined Space Blog March 2018



ELECTRICIANS DON'T WORK LIVE!

PREVENTABLE ELECTROCUTION; BOSS SENTENCED TO 7 YEARS' JAIL

In February 2012, a young man not yet 21 years old died in a preventable and tragic incident in Central Queensland. He was electrocuted after carrying a switchboard that had come into contact with live wires during heavy rain at a townhouse construction site.

The electrical contractor responsible for the young man's death, Nathan Brian Day, was last week sentenced to seven years' jail for manslaughter and perjury - but he will be eligible for parole after serving two years. Day had not installed safety switches to prevent electrocution and he had no experience of a project that size. He returned to the construction immediately after the death to render the site safe.

Day pleaded guilty to perjury, for lying about the safety switches at a 2015 inquest in Mackay into the death.

Source: OHS RepsSafetyNet, 439, 14 March 2018

PCBU charged over British national's road death

A Northern Territory cattle station owner could be fined up to \$1.5 million, after being charged with WHS breaches relating to the death of a worker in a four-wheel-drive vehicle crash on a return trip from collecting fresh produce for the station in August 2016.

NT WorkSafe has alleged that Australian Green Properties Pty Ltd failed to comply with its health and safety duties to the 26-year-old British national in: providing him with a vehicle that wasn't mechanically sound or registered for public roads; and failing to train him to drive safely in outback conditions. The matter was listed for mention in the Darwin Local Court in April.

Source: OHSAlert



WorkSafe: enforcement activity on quad bikes

The Victorian Workplace Authority (VWA) has begun enforcement activities to help reduce the risks associated with quad bike rollovers. From now on, when WorkSafe inspectors conduct an inspection in workplaces which use quad bikes, if a risk of roll over is identified, and an employer has not taken reasonably practicable measures to control the risk, an improvement notice may be issued.

Any employer who fails to comply with an improvement notice risks prosecution for breaching the Occupational Health and Safety Act.

With enforcement activities commencing, Finance Minister Robin Scott has called on farmers to take advantage of the \$6 million quad bike rebate scheme, which is managed by the Victorian Farmers Federation in partnership with WorkSafe. "WorkSafe enforcement activities are now under way. I urge farmers to take advantage of the quad bike rebate scheme to help keep themselves, their employees and their families safe," Minister Scott said. "Quad bikes are used in many workplaces and employers must make sure that reasonably practicable safety measures are in place. Nothing is more important than workplace safety."

Source: OHS Reps SafetyNetJournal 440, 21 March 2018

Quad bikes: Small bumps cause rollovers

Researchers from the University of NSW's Transport and Road Safety unit have found that quad bikes are vulnerable to fatal rollover events even when going over "relatively small bumps on typical grassy slopes at moderate speeds", suggesting they should no longer be considered as fit for farming tasks.

The researchers sought to identify the combination of speed, slope and bump size that caused the previously identified risk of quad bikes suddenly 'yawing' and rolling over after travelling over relatively small rocks or grass tufts. They found that when quad bike speed and slope steepness increase to typical values – 20km/h and 12.5 degrees – the bump size needed to cause a rollover reduces to just 100mm.

Source: OHS Reps SafetyNetJournal 439, 14 March 2018

AIR POLLUTION/AIR QUALITY



Brussels acts to reduce particulate matter (pm) exposure on high air pollution days

Brussels has moved to make the city's public transport and bike share system free on the smoggiest days in a bid to drive down pollution levels and meet EU air quality directives.

After two consecutive days of high particulate matter (PM) levels – defined as surpassing an average of 51-70 micrograms per cubic metre of air – buses, trams and metros would have to open their doors completely free, under new city council rules.

Speed limits for cars would be also cut by about a third and wood burning for stoves would be banned under the law, which was forwarded for judicial review last week.

Officials say they expect it to enter into force by the summer.

The city's failure to deal with its shifting pall of toxic air had embarrassed EU officials and diplomats who often spluttered their way to meetings where they discussed air quality in the bloc as a whole.

Last month, Brussels moved to address the problem with a strategy of low emissions zones that will progressively ban the most polluting cars from its streets. City buses will all be electrified by 2030.

Source: The Guardian, 27 February 2018

Pic: Buses, trams and metros will be free to ride if air pollution peaks for two consecutive days. Photograph: Kevin Man#145910/Flickr Vision

Rapid increases in air pollution harmful to the heart

Rapid increases in nitrogen oxide air pollution may be as harmful to the heart as exposure to sustained high levels, according to research published in February.

The research, carried out by scientists at University Hospital Jena in Germany and published in the *European Journal of Preventive Cardiology* evaluated the association between rapid changes in air pollutants and the risk of myocardial infarction independently of 'absolute' concentrations.

It also looked at whether an association between heart attacks and changes in air pollution exists in "clean air cities", where concentrations of air pollution vary but do not exceed EU limits.

The study was conducted in Jena, a city with 100,000 residents, where concentrations of some air pollutants exceeded EU daily limits on a handful of days over the last few years.

The British Heart Foundation has described the findings of the report as 'further evidence of the daily danger people face from breathing dirty air'.

Source: AirQualityNews, 24 February 2018



Air pollution exposure during pregnancy linked with brain abnormalities in children

A new study has linked residential air pollution during foetal life exposure with brain abnormalities that could contribute to impaired cognitive function in school-aged children, even at levels that are considered “safe.”

A team of scientists from the Netherlands has discovered that exposure to fine particles during foetal life is associated with a thinner outer layer of the brain, called the cortex, in several regions and brain abnormalities that contribute to difficulty with inhibitory control—the ability to regulate self-control over temptations and impulsive behaviour, which is related to mental health problems.

Previous studies have linked acceptable air pollution levels with other complications such as cognitive decline and foetal growth development.

Source: *RD Mag*, 9 March 2018

Tiny airborne particles can lead to respiratory issues in children

Pollution consisting of airborne fine particulates as small as 3 percent the diameter of a human hair can cause respiratory problems in young children.

Researchers found that even a brief increase in PM_{2.5}—atmospheric particulate matter (PM) that have a diameter of less than 2.5 micrometres— could result in the development of acute lower respiratory infections (ALRI) like bronchiolitis in young children, ultimately leading to increased numbers of visits to the doctor.

A team from Brigham Young University, and the University of Utah looked at more than 146,397 ALRI patients treated between 1999 and 2016 at facilities in Utah.

Lead author Benjamin Horne, PhD said “The air pollution itself may make the human body more susceptible to infection or may impair the body’s ability to fight off the infectious agents. It may be that PM_{2.5} causes damage to the airway so that a virus can successfully cause an infection or that PM_{2.5} impairs the immune response so that the body mounts a less effective response in fighting the infection.”

The full study was published in the *American Journal of Respiratory and Critical Care Medicine*.

Source: *RD Mag*, 15 April 2018



GERMANY MOVES TO BAN OLDER DIESEL CARS

Germany's highest administrative court has ruled that individual municipalities could ban older diesel cars from their streets to bring pollution levels down.

Hamburg, Germany's second biggest city, will impose a ban on some of its most polluted streets "within a few weeks" and other major cities, including Dusseldorf and Stuttgart, the home of Mercedes Benz and Porsche are expected to follow.

Source: Telegraph Media Group Ltd, 1028

The European Parliament adopts its position on diesel exhausts

In March the European Parliament's Committee on Employment and Social Affairs adopted its position on the second stage of the revision of the Directive on the prevention of work-related cancers.


It voted to include diesel exhausts in the scope of the directive.

It stated that it was in favour of an occupational exposure limit value of $50\mu\text{g}/\text{m}^3$ calculated on the basis of elemental carbon (one of the components of diesel engine emissions), which is identical to the limit value recently adopted in Germany.

As most European countries do not have a limit value for exposure to diesel exhausts in the workplace, the adoption of such a limit at European level would represent significant progress.

Source: ETUI, 29 March 2018

HEALTH - PHYSICAL



Frack pond in Big Spring Texas used by the fracking industry in the Permian Basin. In Big Spring citizens are limited in their water use due to drought conditions, though the fracking industry has no restrictions for their water usage. Julie Dermansky

How fracking imperils the health of millions of Americans

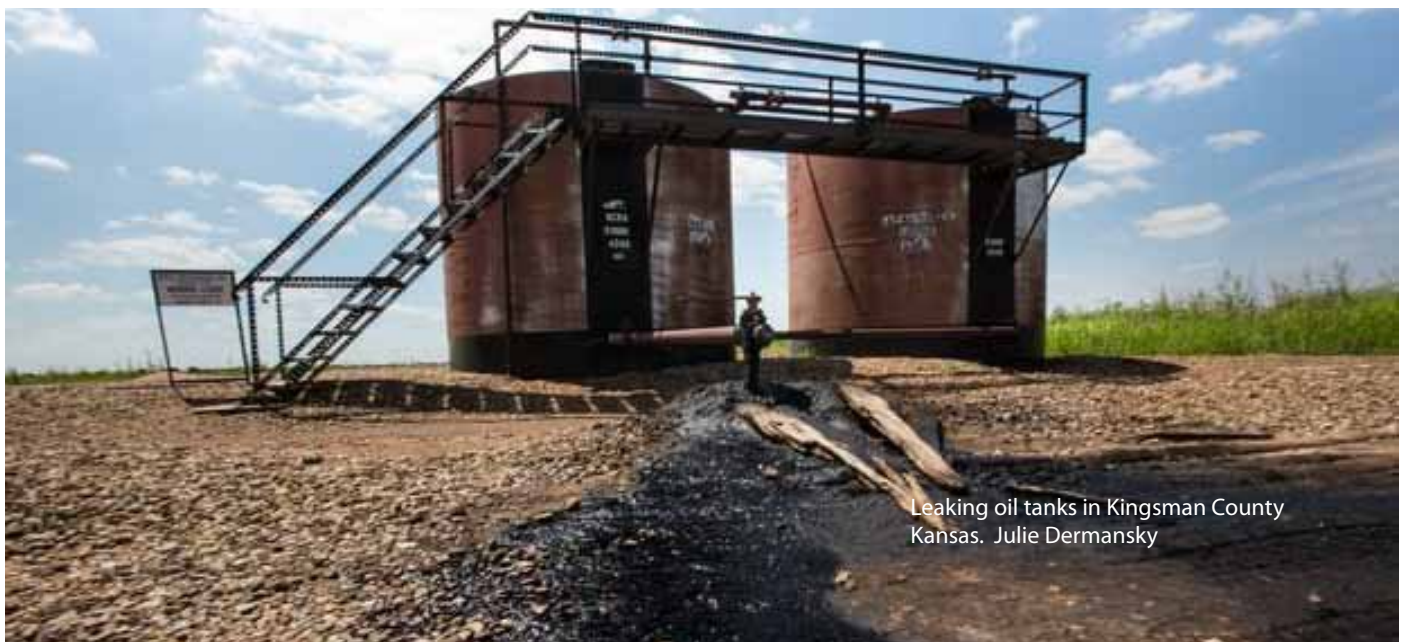
The most authoritative study of its kind allegedly reveals how fracking is contaminating the air and water – and imperiling the health of millions of Americans. The study, released in March by Concerned Health Professionals of New York and the Nobel Peace Prize-winning group, Physicians for Social Responsibility draws on news investigations, government assessments and more than 1,200 peer-reviewed research articles.

The study found that fracking – shooting chemical-laden fluid into deep rock layers to release oil and gas – is poisoning the air, contaminating the water and imperiling the health of Americans across the country.”

Dr Sandra Steingraber, one of the report’s eight co-authors, said “Fracking is the worst thing I’ve ever seen. Those of us in the public health sector started to realize years ago that there were potential risks, then the industry rolled out faster than we could do our science.”

In recent years, the practice has expanded from rural lands to backyards, farms, and within sight of schools and sources of drinking water. “Now we see those risks have turned into human harms and people are getting sick,” says Steingraber. “And we in this field have a moral imperative to raise the alarm.”

Source: *RollingStone*, 17 March 2018



Leaking oil tanks in Kingsman County Kansas. Julie Dermansky

Slower walking speed in older adults may increase the risk of dementia

Because there's currently no cure for dementia, it's important to know about the risk factors that may lead to developing it. For example, researchers have learned that older adults with slower walking speeds seem to have a greater risk of dementia than those with faster walking speeds.

Recently, researchers from the United Kingdom teamed up to learn more about changes in walking speed, changes in the ability to think and make decisions, and dementia. They published their study in the *Journal of the American Geriatrics Society*.

They assessed participants' walking speed on two occasions in 2002-2003 and in 2004-2005, and whether or not the participants developed dementia after the tests from 2006-2015. Then, they compared the people who had developed dementia with those who had not.

The researchers concluded that older adults with slower walking speeds, and those who experienced a greater decline in their walking speed over time, were at increased risk for dementia. But, the researchers noted, changes in walking speed and changes in an older adult's ability to think and make decisions do not necessarily work together to affect the risk of developing dementia.

Source: ScienceDaily, March 2018



The Consequences of exposure to Endocrine Disrupting Chemicals (EDC's)

Strong evidence has emerged over the last decades that human exposure to numerous EDC's is the cause of obesity and obesity-related diseases.

Many EDCs are manmade chemicals that are released into the environment. EDCs are exogenous compounds that interfere with hormonal regulation and normal endocrine systems, thereby affecting the health of animals and humans.

The number of chemicals belonging to EDCs is increasing and as some of them are very stable, they persist in the environment (persistent organic pollutants).

Although they are banned, their concentrations have been continuously increasing over time.

A review published in *Annals of Pediatric Endocrinology and Metabolism* in December 2017 gives a brief introduction to common EDCs, and evidence of harmful effects of EDCs on obesity-related diseases, focusing in particular on EDCs' role in causing mitochondrial dysfunction.

Source: Chemwatch, 9 March 2018





ARE STANDING WORK STATIONS AS HEALTHY AS PROMOTED BY MANUFACTURERS

Standing desks in the workplace may not be as healthy as first thought according to new research conducted by researchers from the University of Jyväskylä, Finland.

The team investigated the physical activity, mental alertness, stress and musculoskeletal strain in employees of a large software company in Finland. The employees completed a questionnaire and participated in the Firstbeat Lifestyle Assessment service.

It was found that the benefits of standing at work over sitting for workers in this industry were not at all as clear-cut as the marketing hype for standing workstations might suggest.

“The findings of this study suggest that the usage of standing instead of sitting workstations results in only modest promotions of physical activity,” said the team.

Moreover, the change “does not have an effect on mental alertness”. Indeed, standing to work seems to shift the stress-recovery balance more towards stress than recovery. They did see a decrease in musculoskeletal strain in the user’s neck and shoulders, although stress and strain was raised in the legs and feet. Interestingly, the use of standing workstations did not have an impact on work posture comfort or workstation satisfaction, the team found.

There were modest physical improvements to health, with heart rates increased by 4.2 beats per minute on average, a rise in VO₂ (the maximum amount of oxygen that an individual can utilise during intense or maximum exercise) of 0.3 mL per kg body mass per minute, and another 6.1 kilocalories were burned per hour. The standing desks also marginally reduced upper body tension. However, these benefits would have to be offset against the increased risk of varicose veins, common in those who stand for long periods, and perhaps lower back problems exacerbated by always being upright.

Source: *Safety Solutions*, 21 February 2018

Fair managers care about sick employees

Research published in the *Journal of Occupational Health Psychology*, could have implications for how managers help employees return to work following a period of absence, or how they support those struggling to manage long-term health issues while at work.

According to the study, organisations should make sure they have well-designed routines for workers with health problems. However, organisations also need to take into consideration the wider work environment to ensure colleagues can offer social support while the individual settles back into work.

Dr Constanze Eib, lead author of the study, said: “Our results show a strong association between feelings of unfairness and the amount of support provided by colleagues. It could be that when you come back to work you still feel unwell, or more unhappy and your co-workers might pick up on this and feel inclined to keep their distance. Added to that, they might have been picking up your work while you were away and all this might contribute to them showing you less concern. That can lead to feelings of being less included in workplace discussions, less valued, and a sense that you are not being treated fairly.” Dr Eib concluded: “It comes down to managers really caring about their employees. They need to make sure they understand their workforce and can foster a supportive culture between colleagues – as well as taking steps to ensure procedures and decision-making processes are unbiased, robust and transparent.”

Source: *TUC Risks* 840, 10 March 2018



Study finds that a lifetime of exercise slows down aging

Researchers from the University of Birmingham UK set out to assess the health of older adults who had exercised most of their adult lives to see if this could slow down aging.

The study recruited 125 amateur cyclists aged 55 to 79, 84 of which were male and 41 were female. The men had to be able to cycle 100 km in under 6.5 hours, while the women had to be able to cycle 60 km in 5.5 hours. Smokers, heavy drinkers and those with high blood pressure or other health conditions were excluded from the study.

The participants underwent a series of tests in the laboratory and were compared to a group of adults who do not partake in regular physical activity. This group consisted of 75 healthy people aged 57 to 80 and 55 healthy young adults aged 20 to 36.

The study showed that loss of muscle mass and strength did not occur in those who exercise regularly. The cyclists also did not increase their body fat or cholesterol levels with age and the men's testosterone levels also remained high, suggesting that they may have avoided most of the male menopause.

More surprisingly, the study also revealed that the benefits of exercise extend beyond muscle as the cyclists also had an immune system that did not seem to have aged either.

The findings come as figures show that less than half of over 65s do enough exercise to stay healthy and more than half of those aged over 65 suffer from at least two diseases. Professor Janet Lord, Director of the Institute of Inflammation and Ageing at the University of Birmingham, said: "Hippocrates in 400 BC said that exercise is man's best medicine, but his message has been lost over time and we are an increasingly sedentary society.

"Our research means we now have strong evidence that encouraging people to commit to regular exercise throughout their lives is a viable solution to the problem that we are living longer but not healthier."

Source: ScienceDaily, 10 March 2018

Certain types of blood pressure meds can increase death risk

Two types of blood pressure medications — alpha blockers and alpha 2 agonist — show increased variability in blood pressure measurements between doctor visits, which is associated with an increased risk of death, according to new research from the Intermountain Medical Center Heart Institute in Salt Lake City.

As a result of the study findings, researchers are encouraging physicians to use other classes of blood pressure medications that show a decrease in mortality risk.

"This study helped us identify blood pressure medications that produce more consistent blood pressure and better mortality outcome data," says Brian Clements, DO, an internal medicine physician with the Intermountain Medical Center Heart Institute and lead author of the study. "Those medications include ace inhibitors, angiotensin receptor blockers, calcium channel blockers, and thiazide diuretics. People who are on other types of blood pressure medications have an increased risk of death."

Results of the study will be presented at the American College of Cardiology Scientific Sessions in Orlando.

Source: Bioscience Technology, 13 March 2018

HEALTH - PSYCHOLOGICAL

Are mental health first aiders a solution to anxiety and depression in the workplace

We are starting to hear the term 'mental health first aiders' (MHFA) in Australia, with HSRs wondering whether their workplaces should have them and what training they need.

If your heart started misbehaving at work, you'd be glad there was a first aider on hand. So, a mental health first aider (MHFA) could be just the job if the problem is in your head, right?

Writing in Hazards magazine, TUC's Hugh Robertson says support for workers is a good thing, but mental health first aiders are not the only option and for union reps usually are not the best option.

The union safety specialist says MHFA training – 200,000 have been trained in the last decade – has its value.

"However, MHFA is not a substitute for preventing anxiety and depression caused by work-related stress, nor is it a substitute for professional support. Any employer that thinks they can deal with mental health concerns just by introducing a few MHFAiders are very much mistaken. After all traditional first aiders are not a substitute for good prevention, occupational health provision and the NHS. I reckon that MHFAiders can be a really useful resource in the workplace but it is only a small part of what employers should be doing."

Robertson calls for a much broader approach in the workplace, "and that is best done in co-operation with the union.

Good policies include addressing attitudes in the workplace to mental health issues, non-discriminatory recruitment and sickness policies, early access to occupational health services and strong workplace stress, harassment and anti-bullying procedures.

Source: OHS Reps SafetyNetJournal 440, 21 March 2018



A close-up photograph of a silver Uber car door. The word "UBER" is printed in large, white, sans-serif capital letters on a black background. Below the logo, the text "SLEEP/FATIGUE" is overlaid in a bold, yellow, sans-serif font. The background of the image shows a blurred street scene with a sidewalk and trees.

UBER

SLEEP/FATIGUE

New Uber feature to force drivers to take break after 12 straight hours

Uber drivers in Canada trying to work for more than 12 hours straight will soon be forced to take a six-hour break before they can hit the road again.

The new policy being rolled out at the beginning of next week will be enforced through the company's ride-hailing app, which will block drivers from accepting customers after a half a day of consecutive work.

According to research conducted by the Ontario Ministry of Transportation, 26 per cent of all fatal and injury crashes are attributed to driver fatigue, and in 2006, as many as 167,000 Ontario drivers were involved in at least one crash due to fatigue or drowsiness.

The feature does constitute a notable shift for Uber, which has long touted a hands-off approach with its employees, leaving work hours and locations up to the drivers to choose.

The forthcoming feature will allow drivers to check how much time they have before a mandatory break and will notify them when they have two hours, one hour and 30 minutes before they'll have to rest.

The app will not count periods when a driver is parked for more than one minute between trips — and doesn't account for drivers who may also be working for a competitor like Lyft.

Uber first experimented with stopping drivers from accepting fares after multiple consecutive hours in a handful of US cities and Australia last fall. In January, it brought the feature to the UK and launched it nationally in the US earlier this month.

Source: HR Reporter, 21 February 2018

Night owls have a higher risk of dying sooner

- "Night owls" -- people who like to stay up late and have trouble getting out of bed in the morning
- "Larks," people who have a natural preference for going to bed early and rise with the sun.

In a new study from Northwestern Medicine and the University of Surrey in the United Kingdom, scientists have found that owls had a 10 percent higher risk of dying than larks. They examined the link between an individual's natural inclination towards morning or evenings and their risk of mortality.

In the study sample, 50,000 people were more likely to die in the 6½ -year period sampled.

The scientists adjusted for the expected health problems in owls and still found the 10 percent higher risk of death.

"This is a public health issue that can no longer be ignored," said Malcolm von Schantz, a professor of chronobiology at the University of Surrey. "We should discuss allowing evening types to start and finish work later, where practical. And we need more research about how we can help evening types cope with the higher effort of keeping their body clock in synchrony with sun time."

"It could be that people who are up late have an internal biological clock that doesn't match their external environment," said Kristen Knutson, Associate Professor, North West University. "It could be psychological stress, eating at the wrong time for their body, not exercising enough, not sleeping enough, being awake at night by yourself, maybe drug or alcohol use. There are a whole variety of unhealthy behaviours related to being up late in the dark by yourself."

Source: ScienceDaily, 15 April 2018



NOISE

High blood pressure and cholesterol associated with noisy jobs

High blood pressure and high cholesterol are more common among workers exposed to loud noise at work, according to a recent study by the US National Institute for Occupational Safety and Health (NIOSH).

Researchers also found that one-quarter of workers in the United States — an estimated 41 million people — reported a history of noise exposure at work.

NIOSH director John Howard said “Reducing workplace noise levels is critical not just for hearing loss prevention — it may also impact blood pressure and cholesterol. Work site health and wellness programs that include screenings for high blood pressure and cholesterol should also target noise-exposed workers.”

The NIOSH research revealed 12 per cent of workers currently had hearing difficulty, 24 per cent had high blood pressure and 28 per cent had high cholesterol. Of these cases 58 per cent, 14 per cent, and nine per cent, respectively, can be attributed to occupational noise exposure.

Source: Cos Mag, 6 April 2018

Trouble hearing? It can increase your risk of injury

Accidental injuries are among the leading causes of morbidity and mortality in the United States.

A new study by investigators at Brigham and Women’s Hospital reveals an increased rate of accidental injuries are associated with self-reported, poorer hearing adults, with leisure-related injuries being most notable among those respondents. However, those with “good” or “a little trouble” hearing were at a higher risk of work-related injuries.

The senior author of the paper, Neil Bhattacharyya, MD, said that “many adults believe that hearing loss, particularly due to aging, is ‘normal’ and therefore of little consequence other than, perhaps, social difficulties. We were motivated to create this study since hearing is a special sense that plays an important role in warning us of danger in our surroundings. We wanted to see if a poorer hearing ability was related to accidental injuries.”

The study concludes that an increased rate of accidental injury was strongly associated with self-reported poorer hearing quality in adults, with leisure-related injuries most consistently associated with a degree of self-perceived hearing difficulty.

“Our data suggests a strong relationship between poorer hearing and accidental injury, especially since the rate of injury increased steadily as the reported hearing worsened as well as the odds ratio for injury. We found that leisure-related injuries were particularly interesting since individuals may not consider that a high-risk occasion for injury and may be paying even less attention to their hearing difficulties. Ultimately, hearing loss may be more consequential than one might think,” said Bhattacharyya.

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Source: ScienceDaily, 25 March 2018



HAZARDOUS MATERIALS

Chemical in plastic that wreaks havoc with hormones may be impossible to avoid, study finds

In a study published in *BMJ Open*, Tamara Galloway, an environmental toxicologist at the University of Exeter, UK, and one of the authors of the paper, reports that despite following guidelines meant to reduce the amount of bisphenol (BPA) in a person's diet, about 90 per cent of the people in the study still had traces of the chemical in their urine.

The chemical, which can be found in some water bottles and food wraps, can cause "reproductive toxicity" in women, according to California's Environmental Protection Agency. Specifically, it can disrupt hormone levels in a person's body.

"Hormones are at the basis of the control of your sexual functions, your reproduction and your development. Hormones also control just about every other process in your body," Galloway said. "If you have a substance that interferes with that hormone activity, then you want to be able to avoid that as much as possible."

BPA's health effects at high levels are pretty well-known. However, Galloway said, the potential effects of low levels of BPA are still controversial. Some studies have shown effects; others haven't.

Galloway notes that her team's work does not specifically look at health effects. It only looked at whether or not people could avoid even low levels of exposure by following recommendations issued by authorities to reduce BPA exposure which typically include not microwaving plastic containers with the chemical, storing foods in glass containers, eating more fresh food and washing hands before eating to reduce your exposure.

Source: *Chemwatch*, 24 February 2018

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Minimising exposure to hazardous contaminants in gold rooms

The Western Australian DMIRS Resources Safety conducted a review of biological monitoring results which show that some gold room workers have been repeatedly exposed to elevated levels of heavy metals such as arsenic, lead and mercury.

Subsequent inspections identified that the control measures (e.g. ventilation) and atmospheric and biological monitoring programs used to ensure contaminants are at levels below exposure standards, are often inadequate and ineffective.

Chronic exposures to lead may cause neurological and behavioural effects such as anxiety, weakness, headaches, tremors, excessive tiredness, depression and other indicators of nervous system damage.

The Bulletin goes on to list actions required to rectify what is a serious health risk.

It is hoped that a follow up inspection will eventuate to ensure that proper systems are in place to avoid a repetition.

Source: *DMIRS Mines Safety Bulletin No 147*



Mesothelioma – why asbestos is so dangerous

The fact that asbestos causes cancer has been largely undisputed for nearly 50 years. Now, researchers supported by the Swiss National Science Foundation (SNSF) have discovered why the fibres cause such damage to the body. “Chronic exposure to asbestos triggers a type of tissue repair,” says Emanuela Felley-Bosco, who led the study. “The immune system goes out of balance and is no longer strong enough to combat tumour formation.”

Contrary to popular belief, asbestos doesn’t cause lung cancer. Rather, it passes through the lungs into a cell layer that surrounds all internal organs (the mesothelium). However, the lymphatic system is unable to clear the long and pointed fibres. Consequently, they remain stuck in the mesothelium where they cause persistent tissue injury, which can lead to cancer.

To investigate how organisms react, the researchers injected asbestos fibres into the abdominal cavity of mice, which also contains mesothelium tissue.

Although asbestos is chemically harmless, these micro-injuries trigger an immune reaction: inflammatory signals are sent out, mobilising white blood cells. Tissue repair signalling pathways are activated in the inflamed mesothelium, and those pathways promote cell proliferation and thereby favour the growth of tumours.

Moreover, the team found an accumulation of mutations in RNA -- a kind of working copy of DNA. The researchers hypothesise that, among other things, these mutations serve to attenuate the tissue repair immune response. As a result, tumour formation is no longer effectively combated and cancer can develop.

A similar mechanism is at work in humans: analysis of data from a gene bank revealed that tumours from patients with poor outcomes also produce large amounts of the enzyme that causes the mutations in the RNA.

Source: ScienceDaily, 10 March 2018

Workplace chemicals and exposure standards

SafeWork Australia has issued an overview of workplace exposure standards for chemicals which contains little more than a restatement of information already provided in previous documents.

Commencing with the preliminary evaluation of Australian workplace exposure standards in 2015, the drawn out process continues today. SafeWork advise that consultation will be open shortly to the public, industry and industry groups, unions, professionals and other interested or affected people with responsibility for managing the risks of hazardous chemicals and airborne contaminants.

Submissions on the impact statement will be used to inform the decision regulation impact statement to be published at the end of 2018.

SafeWork Australia advises that the evaluation of individual chemicals will commence in 2018 and will include an independent peer review process. Once completed, individual evaluation reports will be available on its website.

In the interim Australian workers will continue to be exposed to levels of hazardous chemicals which may or may not be safe.

Commercial pesticides not as safe as they seem

New regulations are needed to protect people and the environment from toxic pesticide ingredients that are not currently subject to safety assessments. This is the conclusion of the first comprehensive review of gaps in risk assessments for “adjuvants” -- ingredients added to pesticide formulations to enhance the function or application of the active ingredient. Ignoring the potential dangers of other ingredients in commonly used commercial pesticides leads to inaccuracies in the safety profile of the pesticide solution, as well as confusion in scientific literature on pesticide effects, finds the review published in *Frontiers in Public Health*.

“Exposure to environmental levels of some of these adjuvant mixtures can affect non-target organisms -- and even can cause chronic human disease,” says Dr Robin Mesnage from King’s College London, who co-wrote the review with Dr Michael Antoniou. “Despite this, adjuvants are not currently subject to an acceptable daily intake and are not included in the health risk assessment of dietary exposures to pesticide residues.”

Pesticides are a mixture of chemicals made up of an active ingredient -- the substance that kills or repels a pest -- along with a mixture of other ingredients that help with the application or function of the active ingredient. These other ingredients are known as adjuvants, and include dyes, anti-foaming agents and surfactants.

Regulatory tests for pesticide safety are currently only done on the active ingredient, which assumes the other ingredients have no effects. This means the full toxicity of a pesticide formulation -- including those used in both agriculture and domestic gardens -- is not shown.

“Currently, the health risk assessment of pesticides in the European Union and in the United States focuses almost exclusively on the active ingredient,” explains Dr Mesnage. “Despite the known toxicity of adjuvants, they are regulated differently from active principles, with their toxic effects being generally ignored.”

Based on a review of current pesticide literature, the authors describe how unregulated chemicals present in commercial formulations of pesticides could provide a missing link between pesticide exposure and observed negative outcomes.

Source: *ScienceDaily*, 10 March 2018

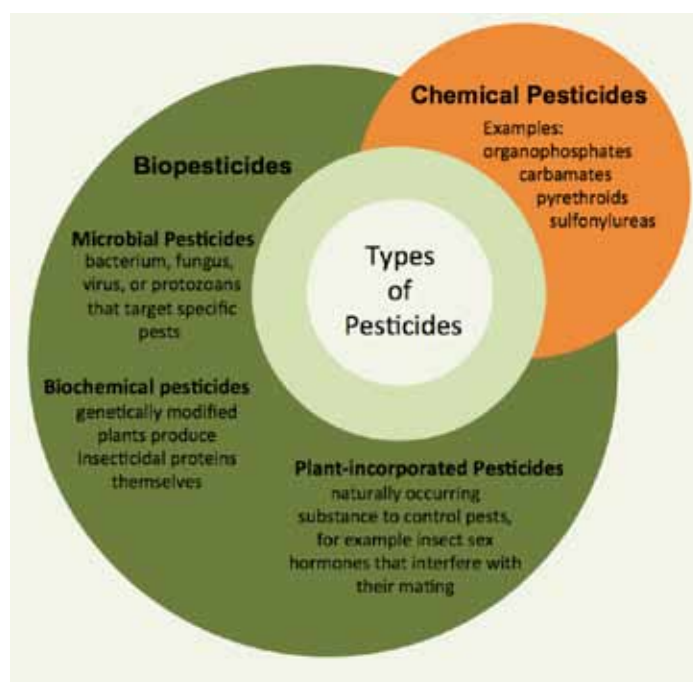
NICNAS: Major industrial chemical reforms postponed

The Federal Government has deferred the commencement of the new risk-based scheme for regulating the introduction (through importation or manufacture) of industrial chemicals in Australia until 1 July 2019.

The Government introduced the Industrial Chemicals Bill 2017 and five other Bills to: establish the Australian Industrial Chemicals Introduction Scheme (AICIS); slash the number of chemicals requiring pre-introduction regulatory scrutiny; and ban most cosmetic testing on animals, by July 2018. However, the legislative package will now not be debated in the Senate until later this year, according to the National Industrial Chemicals Notification and Assessment Scheme (NICNAS).

In multiple submissions to the Government, including to a Senate Inquiry, the ACTU, the VTHC and the AMWU argued the proposed changes would allow potentially very toxic chemicals to enter Australia, and reduce the levels of protection for workers and the general community.

Source: *OHS Repts SafetyNetJournal* 439, 14 March





Women who clean at home or at work suffer increased lung function decline

Women who work as cleaners or regularly use cleaning sprays or other cleaning products at home appear to experience a greater decline in lung function over time than women who do not clean, according to new research published online in the American Thoracic Society's *American Journal of Respiratory and Critical Care Medicine*.

Researchers at the University of Bergen in Norway analysed data from 6,235 participants in the European Community Respiratory Health Survey. The participants, whose average age was 34 when they enrolled, were followed for more than 20 years.

"While the short-term effects of cleaning chemicals on asthma are becoming increasingly well documented, we lack knowledge of the long-term impact," said senior study author Cecile Svanes, MD, PhD, a professor at the university's Centre for International Health. "We feared that such chemicals, by steadily causing a little damage to the airways day after day, year after year, might accelerate the rate of lung function decline that occurs with age."

The study found that compared to women not engaged in cleaning:

- Forced expiratory volume in one second (FEV1), or the amount of air a person can forcibly exhale in one second, declined 3.6 millilitres (ml)/year faster in women who cleaned at home and 3.9 ml/year faster in women who worked as cleaners.
- Forced vital capacity (FVC), or the total amount of air a person can forcibly exhale, declined 4.3 ml/year faster in women who cleaned at home and 7.1 ml/year faster in women who worked as cleaners.

The authors speculate that the decline in lung function is attributable to the irritation that most cleaning chemicals cause on the mucous membranes lining the airways, which over time results in persistent changes in the airways and airway remodelling.

"The take home message of this study is that in the long run cleaning chemicals very likely cause rather substantial damage to your lungs," Øistein Svanes said. "These chemicals are usually unnecessary; microfiber cloths and water are more than enough for most purposes."

Source: *Science Daily*, 17 February 2018

LEGAL / ILLEGAL DRUGS

The impacts of legalisation of marijuana in the workplace

Researchers from the University of Toronto and the Institute for Work and Health, Toronto have questioned the consequences for workplace productivity and health and safety of the legalisation of recreational marijuana in July 2018 in Canada.

How will this impact workplace productivity, and health and safety — especially in occupations involving driving or operating heavy machinery?

The researchers have been reviewing the effects of various drugs that act on the central nervous system — including marijuana — on workplace injuries, deaths and near-misses.

They have found that there is little high quality evidence on the impacts of marijuana in the workplace and what there is, is inconsistent.

In 2017 the US National Academy published a major report on the health effects of marijuana use, including impacts on injuries and accidents in a workplace setting. The review did not find enough evidence to either support or refute a statistical link between marijuana use and occupational injuries or accidents.

The researchers have found very limited data on the extent of workplace cannabis use (e.g. during work, on breaks and in the hours prior to beginning a work shift) and impairment among workers in both the US and Canada.

Consequently they have now received funding to conduct a survey of Canadian workers. They will measure the current magnitude of cannabis consumption at work, reasons for workplace use, perceptions of its effects on work and availability in the workplace.

Further future research will be to identify an accurate measure of impairment for use in workplaces.

Source: National Post, 25 January 2018



Large study finds alcohol the biggest risk factor for dementia

A study by the CAMH Institute for Mental Health in Canada has found that alcohol is the biggest risk factor for dementia.

The study looked specifically at the effect of alcohol use disorders, and included people who had been diagnosed with mental and behavioural disorders or chronic diseases that were attributable to chronic harmful use of alcohol.

Of the 57,000 cases of early-onset dementia (before the age of 65), the majority (57%) were related to chronic heavy drinking.

The World Health Organization (WHO) defines chronic heavy drinking as consuming more than 60 grams pure alcohol on average per day for men (4-5 Canadian standard drinks) and 40 grams (about 3 standard drinks) per day for women.

As a result of the strong association found in this study, the authors suggest that screening, brief interventions for heavy drinking, and treatment for alcohol use disorders should be implemented to reduce the alcohol-attributable burden of dementia.

Policy Research Director Dr. Jürgen Rehm said: "Alcohol-induced brain damage and dementia are preventable, and known-effective preventive and policy measures can make a dent into premature dementia deaths."

Source: Science Daily, 18 February 2018

Pic: The World Health Organization (WHO) defines chronic heavy drinking as consuming more than 60 grams pure alcohol on average per day for men (4-5 Canadian standard drinks) and 40 grams (about 3 standard drinks) per day for women.



Impact of alcohol and illicit drug use on the burden of disease and injury in Australia

Australian Burden of Disease Study 2011

This report quantifies the health impact that alcohol and illicit drug use place on Australia, including as risk factors for other diseases and injuries. It estimates that alcohol and illicit drugs were collectively responsible for 6.7% of Australia's disease burden in 2011. The report highlights that health inequalities exist, with lower socioeconomic groups and more remote areas generally experiencing higher rates of disease burden due to alcohol and illicit drug use.

aihw.gov.au

Impact of alcohol and illicit drug use on the burden of disease and injury in Australia: Australian Burden of Disease Study 2011

The Australian Institute of Health and Welfare (AIHW) has released a new report which estimates that alcohol and illicit drugs were collectively responsible for nearly 1 in every 20 deaths.

Key findings:

The report shows that alcohol and illicit drugs were collectively responsible for 6.7% of Australia's combined fatal and non-fatal disease burden. This compares to 9% from tobacco smoking and 2.6% from physical inactivity.

'The burden was much higher in males than females—alcohol and illicit drugs were responsible for 9.1% of all disease burden in males, compared to 3.8% in females.

The report also shows that a higher proportion of the burden of alcohol and illicit drugs was 'fatal'—that is, due to early death—than 'non-fatal'

Overall, 8.1% of Australia's fatal burden was due to alcohol and illicit drugs, while 5.2% of all non-fatal burden was caused by alcohol and illicit drugs.

Combined, alcohol and illicit drugs were responsible for 4.5% of all deaths in Australia in 2011—equating to 6,660 deaths, or about 1 in every 20 deaths.

By itself, alcohol use was responsible for 4.6% of all disease burden. One-third of this burden was due to alcohol dependence.

Alcohol over-use was responsible for almost one-third of the burden of road traffic injuries.

On its own, illicit drug use was responsible for 2.3% of Australia's disease burden. Opioids accounted for the largest proportion (41%) of the illicit drug use burden, followed by amphetamines (18%), cocaine (8%) and cannabis (7%). In addition, 18% of the burden was from diseases contracted through unsafe injecting practices.

'The burden from alcohol use fell by around 7% between 2003 and 2011 and further reductions are expected by 2020 based on these trends.

Between 2011 and 2020, burden from the use of amphetamines is expected to rise by 14%, while the burden of disease from cannabis use is expected to rise by 36% for females and remain steady for males. The burden of disease from cocaine use is expected to fall by 24% for males and remain steady for females.

The burden caused by unsafe injecting practices is expected to fall by 21% for males and 17% for females.



Severe Black Lung Disease in US miners

NIOSH researchers have reported the largest cluster of severe black lung disease ever described in the scientific literature, according to new research published in the *Journal of the American Medical Association (JAMA)*.

The findings reflect a failure to protect these coal miners from work-related exposure to coal mine dust and highlight the critical need for these protections, according to the investigators.

A 2014 federal rule decreased the amount of respirable coal mine dust permitted in mines, implemented changes for monitoring dust levels in air, and expanded the Coal Workers' Health Surveillance Program.

Regular screening for black lung disease remains critical for early detection and determining if contemporary miners receive adequate protection.

Source: NIOSH Research Rounds, Volume 3, No. 8, February 2018

Occupational cancers –facts that every employer and employee should be aware of

In a paper presented at the European Trade Union Institute Work and Cancer Conference in Brussels in November 2017, 10 facts were identified concerning occupational cancers:

- Cancer is the first cause of death at work within the EU - over 100,000 deaths/year !
- Occupational cancers are invisible
- Women's occupational cancers are even more invisible
- Work-related cancers cause social inequalities in health. Shopfloor workers are more exposed to carcinogens than white collar workers !
- The societal cost of work-related cancers is tremendous
- For many carcinogens we knew yet we acted too late
- Over 80% of exposure is caused by 50 carcinogenic agents
- Legislation in the EU exists to tackle work-related cancers.....but needs to be continuously improved
- There is no agreed mechanism within the EU to derive Occupational Exposure Limit Values (OELs) for carcinogens
- Occupational cancers are preventable.

Source: Tony Musu, European Trade Union Institute Work & Cancer conference Brussels, 14-15 November 2017

Do you know your workplace cancer risk?

Do you work in a job where you are exposed to asbestos, welding fumes or diesel engine exhaust? Are you a health and safety professional talking to workers as a regular part of your job? Or are you an HSR representing workers who may be exposed to cancer-causing agents?

The Cancer Council needs your help to create entertaining and informative toolbox videos on these cancer-causing agents and what workers can do to protect themselves from exposure.

Contact the Cancer Council and help in their fight to reduce the incidence and impact of cancer.

Source: SafetyNetJournal 439, 14 March 2018

Workers' Compensation

Belgium: effects of cancer recognised as a disability

In its ruling of 20 February 2018 the Brussels Labour Court equated the effects of cancer to a disability. The case involved a shop employee whose employer had refused to adapt her working hours to allow her to return to work on a part-time basis after an absence of two years following cancer treatment. The employee had in the end been laid off.

According to the Labour Court, her employer's refusal to adapt her working hours had been illegal and he was ordered to pay compensation of EUR 12 500 for discrimination.

Taking the case-law of the European Court of Justice as its basis, the Brussels Labour Court stated that the effects of cancer could be equated to a disability. In Belgium disabled people are protected by a law against discrimination, which stipulates that employers must make 'reasonable arrangements' to allow their employees with disabilities to continue working.

'Symptomless' claims now compensable in the UK

A landmark judgment at the UK's highest court has ruled that three former employees of the chemicals company Johnson Matthey should be compensated after they developed a sensitivity to platinum salts which led to them losing their jobs on medical grounds. The Supreme Court ruling means that if an employer has been negligent and that negligence causes a physiological change in the body, and that change results in economic loss, an employee may be entitled to claim compensation, even though the individual is symptomless.

The Supreme Court judgment compared the impact of their sensitivity to that of coffee tasters suffering impairment of their senses of taste and smell, which doesn't cause physical harm but does stop them continuing in their job. As platinum salts were an essential part of the work done by the Johnson Matthey claimants, they all lost their jobs. Harminder Bains from law firm Leigh Day, who represented the men, said: "This judgment is a landmark judgment in the definition of personal injury for those workers who have been negligently exposed in the workplace and who have suffered an injury which may be symptomless but which has a huge impact on their work and subsequently their life."

This landmark judgment is a clear warning to all employers that they cannot side-step their health and safety responsibilities to their employees and must not cut corners and expose other workers to hazardous working conditions.

Source: TUC Risks 843, 7 April 2018

Pic: Lawyers with the three Johnson Matthey claimants





Occupational Health Society of Australia (WA)



Membership of the Society is open to all those interested in occupational health and safety.

\$50 ordinary membership

\$20 student membership.

Simply email safety@marcsta.com with your details.

Incorporated in 1978, the Occupational Health Society of Australia (WA Branch) is a non-profit association which provides a forum for the wide range of disciplines engaged in the occupational health profession in Western Australia.

The aims of the Society are:

- to develop effective occupational health practice within Western Australia
- to encourage awareness by individuals, organisations and other bodies, of the role of occupational health
- to provide a forum for professional contact between persons interested in, and working in, occupational health
- to express an independent, professional viewpoint on all aspects of occupational health considered desirable in the public interest
- to seek the improvement or an extension of the existing legislation for the promotion of safety and health at work in order to ensure uniform principles are applied in all occupational activities.

Please contact the Secretariat on ohswa@outlook.com.au regarding membership matters.



Occupational Health Society of Australia (WA)

Members

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Ms Joyce Blair

Mr Forbete Chenwi

Ms Lee Cherry

Mr Alan Clarkson Snr

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