



L-R Hon Bill Johnston, MLA, Terry Slevin, Prof Lin Fritschi, Dr Michael Maxwell, Dr Peter Connaughton, Michael Tunnecliffe

OHSA(WA) SEMINAR - Thursday, 13 July 2017

Improving Occupational Health for West Australians

The Occupational Health Society of Australia (WA) will conduct an important and topical seminar on 13 July 2017 which will address a range of issues of concern to occupational health and safety professionals.

Matters for consideration and discussion:

- The future direction of occupational health and safety legislation in Western Australia
- Growing concerns with the incidence of occupational carcinogens
- The role of occupational health physicians and the monitoring of workplaces and the health of employees under the expected Model OHS legislation
- The current status and direction of hazardous chemicals exposure in Australian workplaces

Details

Date: Thursday, 13 July 2017

Venue: Cambridge Room, City West Receptions, 45 Plaistowe Mews, Perth

Time: 8:30 am – 12:30 pm

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MONITOR EDITOR

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Improving Occupational Health for West Australians



Keynote Speakers

The **Hon Bill Johnston**, MLA
Minister for Mines and Petroleum;
Commerce and Industrial Relations

Prior to entering Parliament in 2008 as the Member for Canning, Minister Johnston spent seven years as the State Secretary of WA Labor and was a former senior official of the Shop, Distributive and Allied Employees Association, the Union representing retail and warehouse workers.

Terry Slevin, Director of Education and Research, Cancer Council WA
Chair, Occupational and Environmental Cancer Committee, Cancer Council Australia

Terry Slevin is one of the Cancer Council's foremost experts on public health research and health promotion and a leading spokesperson on workplace cancer risks and environmental carcinogens.

Professor **Lin Fritschi**, School of Public Health, Curtin University

Professor Lin Fritschi is a cancer epidemiologist with a particular interest in occupational causes of cancer. She investigates potential new occupational causes of cancer and studies groups of workers with higher risks of cancer with the aim of reducing the burden of occupational cancer in our society.

Dr **Michael Maxwell**, Special Counsel and Scientific Analyst, Clayton Utz

Michael has over 20 years' experience in regulatory, toxic tort and OSH issues advice and litigation. His legal skills are complemented by his scientific research background in Pharmacology and Toxicology, with a PhD in Pharmacology.

Michael deals extensively with complex and contentious expert evidence on exposure, toxicological mechanisms and clinical outcomes across a diverse range of health-related issues and challenging regulations, including OSH compliance, legislative reform and defence of investigations and prosecutions.

Dr **Peter Connaughton**, President of the Australian Faculty of Occupational and Environmental Medicine

Peter is President of AFOEM and he works as an Occupational Physician in private practice in Perth. He is an Adjunct Associate Professor at the University of Notre Dame, Fremantle. He has an MBA from the University of WA. He serves on the boards of the RACP and CINI Australia.

Michael Tunnecliffe, BA (Hons), MAppPsych (Clinical), Dip Crisis Intervention, Dip Training & Assessment, MACPA, Clinical Psychologist,

Michael is a Clinical Psychologist with a background of more than 30 years working in mental health. Over this time Michael has provided psychological services to clients from across industry, including mining, oil and gas, road transport, construction, airlines, manufacturing and the emergency services.

As well as his mental health clinical and consulting work, Michael has held the position of Executive Manager of the Psychology Unit with Western Australia Police and was the Director of Employee Assistance with BSS Psychology. He also held a position of Adjunct Senior Lecturer at the University of Notre Dame Australia for 10 years. Michael is also a trained supervisor in the Matrix Model for Intensive outpatient addiction treatment.

Michael continues to provide workshops and training on mental health and well-being in the workplace and is often invited to address industry groups.

Registration

Please see the **registration form** on page 26 of this issue of the Monitor.



Legislative/regulatory matters

A NEW ERA IN OCCUPATIONAL HEALTH AND SAFETY IN WESTERN AUSTRALIA

A new Department is to be formed by the amalgamation of the Department of Mines and Petroleum with the regulatory and labor relations functions of the Department of Commerce.

The former Acting Director General of the Premier and Cabinet, David Smith, will head up the transition to the new **Department of Mines, Industry Regulation and Safety**.

Mr Smith has had more than 20 years of experience in the Commonwealth public service, including the Department of the Prime Minister and Cabinet and an overseas posting with the Department of Foreign Affairs and Trade.

Mr Smith, who commenced his new role on 4 May, commented that "this is a very exciting time, which I am sure will also present challenges, but I look forward to making the transition as easy as possible for all of us across both agencies.

Victorian Bill – proposed amendments to Occupational Health and Safety Act

From 1 July 2017, failing to preserve a person's workplace incident site will be an indictable offence in Victoria, with high fines. Limitation periods for launching safety prosecutions could also be extended or bypassed under an OHS Bill introduced in that state.

Other proposed amendments include:

- creating a separate offence (and fine) for contravening an enforceable undertaking
- amending the definition of "medical treatment" to include treatment by nurses, as well as doctors
- making the failure to notify serious incidents or preserve incident site indictable
- allowing provisional improvement, improvement, prohibition or non-disturbance notes to be served electronically
- clarifying the prohibition on discriminating against an employee or the rights of inspectors
- amending the current two year limitation period for launching prosecutions
- making the offence of providing false or misleading information an indictable rather than a summary offence.

Source: SafetyNetJournal, 399, 31 March 2017

WORK HEALTH AND SAFETY LAWS IN QUEENSLAND TO BE SCRUTINISED

An independent reviewer has been appointed to audit work health and safety laws in Queensland following a tragic series of workplace incidents in 2016.

The best practice audit will consider whether an offence of “gross negligence causing death” and an increase in the current penalty levels as a stronger deterrent for non-compliance should be introduced.

At the moment, employers can be prosecuted for negligence, which carries maximum penalties of five years imprisonment and fines of up to \$3 million for corporations, \$600,000 for individual directors and \$300,000 for others.

The review will also consider the effectiveness of Worksafe Queensland in the light of contemporary practice and its functions – inspections, investigations, prosecutions, enforceable undertakings, research, strategy and policy development, information and education and awareness campaigns.

Source: Safety Solutions, 7 April 2017

New regulatory requirements for OHS committees and health and safety representatives in British Columbia

In early April 2017 in British Columbia, amendments to the OHS regulations came into effect.

Under the current legislation, employers must establish a joint OHS committee in workplaces with 20 or more workers; a worker health and safety representative is required in each workplace with 10-19 workers.

The amendments to the Regulation create, among others, two new obligations in respect of Committees and Representatives:

Evaluation:

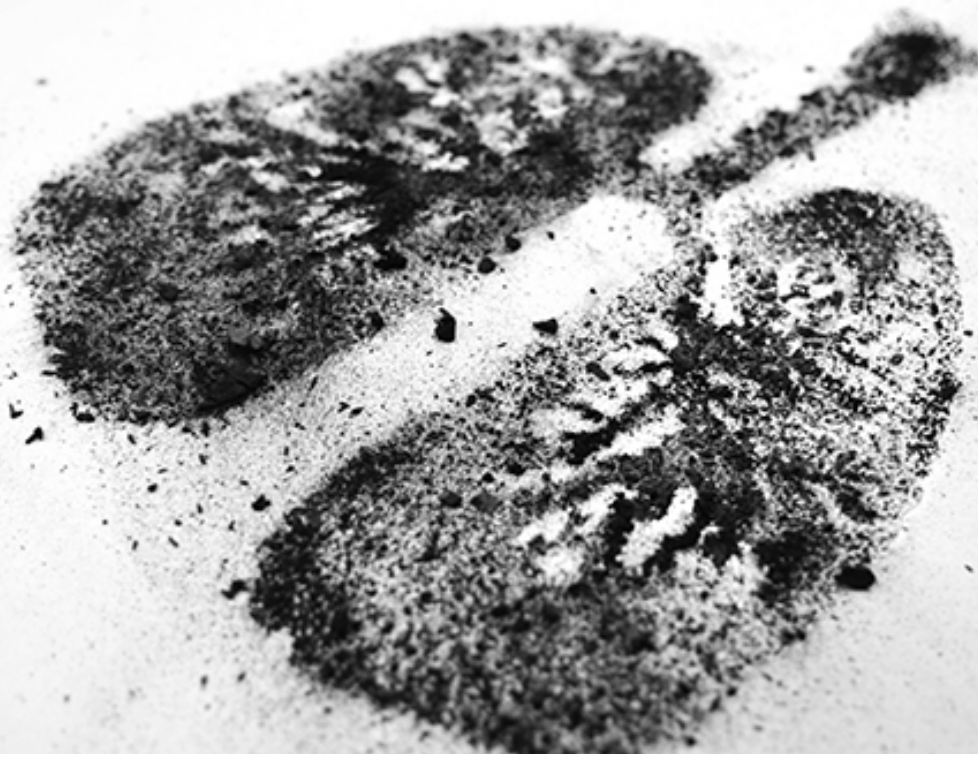
Employers, Committee co-chairs, or certain other designated individuals must conduct an **annual written evaluation of a Committee’s performance during the preceding year**. The evaluations must discuss, at a minimum whether the Committee has met specific statutory obligations listed in section 3.26(3)(a) of the Regulation; the effectiveness of the Committee’s rules and procedures; and the overall effectiveness of the Committee as a whole.

Training:

When an individual has been selected to join a Committee, he/she must receive at least eight hours of training within six months of selection. In the case of a Representative, he/she must receive at least four hours of training. The Regulation provides for exceptions in certain limited circumstances. The scope of the training an individual must receive depends on whether he/she is a Committee member or Representative, however at a minimum the content must include instruction on the duties of a Committee or Representative, workplace safety inspection and investigation, and requirements regarding refusal of unsafe work.

While occupational health and safety is considered an obligation shared among all stakeholders, the above amendments place responsibility on the employer to ensure that the evaluation and training described above takes place.

Source: Lexology, 11 April 2017



PARLIAMENTARY INQUIRY FINDS MAJOR REGULATORY FAILURES IN HEALTH MONITORING

An ongoing inquiry has found that black lung was never eradicated in Australia, but persisted because of “massive” regulatory failures.

In an interim report, the Queensland parliamentary inquiry committee says that over the last three decades, the entire coal industry had “laboured under the illusion” that coal workers’ pneumoconiosis (black lung) had been eliminated in Australia, with Queensland’s last cases being reported in the early 1980s.

The report’s findings include that:

- there were “serious shortcomings in the practices of health professionals charged with monitoring the health of coal workers”, while mine operators gave “inadequate attention” to dust mitigation and health surveillance;
- the Department of Natural Resources and Mines (DNRM) didn’t administer coal mining health and safety laws with respect to respirable dust, adequately maintain dust records for coal mines, or require mines to report dust-level monitoring results or exceedances;
- no mine operator has ever been prosecuted for breaching the regulatory dust exposure limit or exposing workers to excessive dust, and the use of other enforcement powers hasn’t been consistent or effective;
- the DNRM’s Safety in Mines Testing and Research Station (SIMTARS) hasn’t conducted any research on respirable dust or its mitigation, and provides dust monitoring on a fee-for-service basis, creating potential conflicts of interest;
- SIMTARS’ health surveillance unit has “failed to undertake any actual health surveillance” since its establishment, and serves “as nothing more than a storage unit for miners’ chest x-ray and health records”. During the mining boom, the unit was “overwhelmed” by health assessment records and stored many of them in a “janitor’s cupboard” and in shipping containers, where many documents perished due to environmental conditions; and
- WorkCover Queensland approved a claim for black lung in 2006, but didn’t alert the DNRM to the diagnosis. Meanwhile, Queensland Health didn’t treat the diagnosis “as a sentinel event or undertake any investigation as to how a disease previously thought to have been eradicated had re-emerged”.

See the report <http://www.parliament.qld.gov.au/Documents/TableOffice/TabledPapers/2017/5517T816.pdf> for the recommendations.

Source: OHS News Alert, 24 March 2017

SAFETY

Major construction firms unite on health and safety

In a major breakthrough in New Zealand, the country's largest construction companies are joining forces to improve workplace health and safety and signed an agreement to standardise their approach to on-site health and safety.

A not-for-profit membership organisation, Site Safe, set up by the industry to support improved health and safety, will now facilitate the implementation of decisions made by the group.

Chief Executive Alison Molloy welcoming the commitment said "The companies supporting this agreement, and Site Safe, know that working together to standardise and improve health and safety practice will achieve far greater benefits and enable subcontractors and their workers to have better consistency about what is required of them."

The signatories have agreed to work together on several priority areas, including standard requirements for safety gear, prequalification, alcohol and drug testing, and certain high-risk activities.

A further key area is how to best ensure workers are fully engaged in their own and others' health and safety.

Source: Scoop, 7 April 2017

Health and safety reps more effective when supported by unions

New research has found strong evidence that health and safety representatives (HSR's) supported by a trade union were more effective in getting important safety matters addressed and resolved than health and safety representatives acting on their own.

The research also showed that mine management is not playing its facilitation role, and as a result health and safety representatives are denied the benefits of that support.

The research involved interviews with trade unions nationally and regionally, miners, and government inspectors, as well as other key parties in Australia, Canada, India, Indonesia and South Africa.

The research was carried out by Professor David Walters from Cardiff University, and Professor Richard Johnstone from the Queensland Institute of Technology and was presented at a workshop held in Johannesburg, South Africa on 7 March 2017.

Source: Industrial, 14 March 2017

Measuring and reporting health and safety performance

Safe Work Australia has issued a report titled "Measuring and Reporting on Work Health and Safety" which explores processes for gathering and communicating the WHS performance information that guides the WHS decisions of an organisation's officers.

The Model WHS Act requires officers of a person conducting a business or undertaking (PCBU) to exercise due diligence to ensure compliance with its health and safety duties.

The document will be of interest to large organisations with the resources available to interpret it.

<http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/992/measuring-and-reporting-on-work-health-and-safety.pdf>

MEASURING AND REPORTING ON WORK HEALTH & SAFETY





NTC seeks feedback on proposal for drivers to allow hands off the wheel in some automated vehicles

The National Transport Commission has released a discussion paper, *Clarifying control of automated vehicles*, calling for input on the development of national enforcement guidelines to clarify if the human driver or the automated driving system is in control at certain levels of driving automation.

Chief Executive of the NTC Paul Retter said agreement on a position about the definition of 'proper control' is a fundamental step in preparing Australia for the safe deployment of automated vehicles.

The discussion paper explores three key questions:

- Who is in control of an automated vehicle – the human driver or the entity responsible for the automated driving system?
- How should the proper control test apply to the human driver in vehicles at different levels of automation?
- How should the proper control test apply to the automated driving system when it is engaged?

Submissions for this discussion paper are requested by Friday, 2 June 2017 via the NTC website.

Feedback from this consultation will inform the development of national enforcement guidelines which will be presented to transport ministers in November 2017.

Source: NTC News, 12 April 2017

Effective worker representation in occupational safety and health management in Europe

In a new report, EU-OSHA details the findings of its qualitative study on worker participation and consultation in occupational safety and health (OSH). The study — a follow-up to EU-OSHA's second European Survey of Enterprises on New and Emerging Risks (ESENER-2) — suggests that worker representation on OSH is declining across Europe, while management-led arrangements for OSH participation are on the increase.

The determinants and possible consequences of these changes are explored.

This comparative study is based on in-depth interviews with management and worker representatives from 143 establishments, of various sizes and from different sectors, situated in seven EU Member States. The findings provide the most complete picture to date of how workers' OSH interests are represented in establishments across Europe.

EU-OSHA's Director, Dr Christa Sedlatschek, emphasises that 'despite contextual differences between Member States, one thing is clear: a strong employer commitment to participatory approaches to OSH, supportive worker organisations within or outside establishments, and well-trained, well-informed worker representatives are key to effective worker representation.'

Source: EASHW Press Release, 4 April 2017



British Columbia acts to eliminate requirements to wear high heels in workplaces.

Following the publicity in the UK concerning the workplace requirements that force women to wear high heels, the government of British Columbia, Canada has banned any similar requirement in the Province.

Risks of slipping or falling and possible damage to the feet, legs and back were cited as reasons for new rules

A press release issued by the Premier and Labour Minister says "There is a risk of physical injury from slipping or falling, as well as possible damage to the feet, legs and back from prolonged wearing of high heels while at work."

Guidelines around the amended regulation will be available within weeks.

Source: CBC News Canada, 9 April 2017

USA Senate kills off worker safety rule

As predicted, the Republican Party in the USA has commenced rolling back worker safety regulations disliked by business groups. The Senate has voted to kill a rule, finalised last August but blocked in October, requiring federal contractors to disclose and correct serious safety violations.

The regulation would have limited the ability of companies with recent safety problems to compete for government contracts unless they agreed to remedies. Other amendments to worker safety regulations are expected shortly.

Source: Safety Net Journal, 397 15 March 2017

The US safety regulator has now stopped issuing press releases highlighting enforcement action for serious safety offences. Until the new president took office, OSHA's policy was to issue news releases where a penalty for safety offences was \$40,000 or above. The use of news releases was seen as a way to increase the effectiveness of a relatively small agency by making apparent the financial and reputational consequences of being caught.

Congress is poised to pass legislation that would undo the OSHA record-keeping requirements that many believe make life safer for workers. Safety advocates believe that forthcoming legislation will be introduced such that injury records keeping will, in effect, become voluntary.

Source: TUC Risks 793, 25 March 2017

Sexual harassment of hospitality workers

A union poll of hospitality workers in Australia has revealed that almost 89 percent report being sexually harassed at work, with almost one in five reporting sexual assaults.

United Voice found only one-third of the over 300 workers who took part in the online survey believed that their employer took sexual harassment seriously, with nearly half believing they did not.

Jess Walsh, Victorian Secretary of the hospitality union said the survey results were an indictment of the industry. Every day young women go to work feeling unsafe, in fear of being groped, humiliated or threatened by customers or managers.

The union said it will be calling for 'crisis talks' with employers and hospitality workers on measures to make workplaces safer.

Source: TUC Risks 799, 13 May 2017

“ He asked me how much extra for breast milk. I was 15.”

HARASSED AT WORK?

SHARE YOUR STORY!



Road transport industry statistics

Safe Work Australia have released a new report – Road Transport Industry Profile which contains the latest road transport industry statistics.



While there have been substantial reductions in the numbers of and rates of injuries and fatalities in the industry over the last 15 years, the road transport industry remains a high risk industry with claim and fatality rates substantially higher than the all industry average.

The road transport industry accounts for 2 percent of the Australian workforce, however it accounted for 17 percent of work-related fatalities in 2015 and 4 percent of serious workers' compensation claims in 2014-15.

Source: Safe Work Australia Road Transport Industry Profile

Integrity of International Journal of Occupational and Environmental Health under scrutiny

A leading OHS journal is facing a wave of criticism after its respected editor David Egilman was replaced by the publisher with an industry consultant.

The editorial board was not consulted on the change which followed withdrawal of a paper by Egilman that was critical of corporate-sponsored research.

The publisher's replacement was a corporate consultant who is chair of a program at Toxicology Excellence for Risk Assessment, a corporate consulting firm.

The editorial board members have called for Egilman to be reinstated and for the publisher, Taylor and Francis, to keep out of the editorial process.

Michael F Jacobson, president of the Center for Science in the Public Interest (CSPI) said "Taylor and Francis' actions undermine the credibility and independence of the International Journal of Occupational and Environmental Health".

Source: TUC Risks 799, 13 May 2017

NSW tightens requirements for safety-critical statutory mining personnel

A maintenance of competence scheme for all holders of soon-to-be introduced practising certificates has now been developed and published by the NSW Resources regulator in consultation with the Mining and Petroleum Competence Board.

A practising certificate will be required by anyone who works, or wishes to work, in certain safety-critical statutory positions in the NSW mining and petroleum industry. If a person currently holds a certificate of competence they will need to apply for a practising certificate to exercise functions under the Work Health and Safety (Mines and Petroleum Sites) Regulation 2014 e.g. Quarry and Mining Engineering Managers. Practising certificates will be issued for a period of five years.

Information on the scheme is available on the Resources Regulator's website or by contacting practising.certificates@industry.nsw.gov.au

Source: NSW Planning & Environment Mine Safety News 5 May 2017

AIR POLLUTION

AIR POLLUTION MAY AFFECT HUMAN HEALTH VIA BACTERIA CHANGES IN RESPIRATORY TRACT

New research suggests that air pollution may have an effect on human health by altering bacteria. It shows that black carbon, a major component of air pollution, dramatically changes how bacteria grow and form biofilms, which can affect their survival in the lining of airways and their resistance to antibiotics.

The team suggests that the work may have important implications for the treatment of infectious diseases, which are known to occur more frequently in places with high levels of air pollution.

First author, Julie Morrissey, associate professor in microbial genetics at the University of Leicester, UK, says that the findings show "that the bacteria which cause respiratory infections are affected by air pollution, possibly increasing the risk of infection and [reducing] the effectiveness of antibiotic treatment of these illnesses."

According to the World Health Organization (WHO), air pollution is the largest environmental risk factor for human disease. They estimate that in 2012, around 1 in 8 deaths worldwide was due to exposure to air pollution.

Source: Medical News Today, 3 March 2017

Pic above: The researchers found that exposure to black carbon changes the composition and structure of biofilms of bacteria that infect the respiratory tract. This picture shows *Streptococcus pneumoniae* with black carbon.

Image credit: University of Leicester



Are workplace diesel exhaust exposures more hazardous than we think?

With a series of epidemiological studies and the World Health Organisation (WHO) confirming that diesel exhaust causes lung cancer, the next challenge is determining how to regulate exposure and “answer several pressing scientific questions”, says Dr Debra Silverman of the US National Cancer Institute in an article published in the British Medical Journal’s Occupational and Environmental Medicine.

“As we observed for cigarette smoke, a product of combustion and a powerful lung carcinogen that causes cancer of 20 other sites, diesel exhaust may cause cancer of sites such as the urinary bladder, larynx and colon.”

Other important questions, she says, are:

- How much of the carcinogenicity of particulate matter in air pollution in urban areas is attributable to diesel exhaust?
- Like other forms of air pollution, does diesel exhaust cause cardiovascular disease and conditions like non-malignant respiratory disease? and;
- Will replacing “old” diesel engines with “new” technology diesel engines with significantly reduced emissions “prove to be sufficient for safety from disease for the millions of diesel-exposed workers worldwide?”

In 2016, Dutch researchers found that safe occupational exposure limits are far lower than common exposures, and can’t be achieved by pre-2007 diesel engines.

A further study showed that achieving an acceptable risk of one lung cancer death per 1000 diesel-exposed workers requires reducing exposure limits to below one microgram per cubic metre of elemental carbon, “making continued use of diesel equipment based on older technology difficult.”

Source: OHS News Alert, 17 March 2017

Staggering toll of air pollution worldwide

Despite calling for clean air and clean water in his first speech to Congress, President Trump is reportedly aiming to cut the Environmental Protection Agency’s staff by a fifth.

He believes there are enough ‘superfluous’ EPA programs, such as climate change. In reality, focusing only on the pollution challenges of the past and not those of the present or the future, ignores vast volumes of evidence on the ecological and human damage that various types of pollution still cause.

A group of American and Canadian researchers recently released a global air pollution death toll, finding that two major types of air pollution were associated with 4.2 million deaths in 2015, which was a staggering 7.6 percent of all deaths.

“Studies of long-term exposure to air pollution demonstrate that people living in more polluted locations die prematurely, compared with those living in areas with lower levels of pollution. The other side of the coin is that when air quality improves, so does population health,” said the report.

Source: Washington Post, 5 March 2017

HEALTH - PHYSICAL

Kidney disease in sugar cane workers continues to occur unchecked

At least 20,000 people – most of them young agricultural workers – have died from chronic kidney disease in Nicaragua since it first came to the notice of doctors in the late 1990s.

Other countries in Central America – such as Costa Rica – are also badly affected. “In the west, chronic kidney disease affects between 5% and 10% of people, most of them elderly or affected by diabetes,” said kidney expert Ben Caplin of University College London. “Less than 1% of people aged around 30 have chronic kidney disease in the UK. By contrast, in parts of Nicaragua that figure is 20% to 30% for people in the same age group.”

The tragedy, said Caplin, is that the disease has been known about for more than a decade yet no effective action to counter it has been taken. “I think it is an indictment of public and occupational health across the world that we have not sorted this out. If this was happening in the west it would have been dealt with long ago,” said Caplin, who is working on a long-term project – with the Autonomous University of Nicaragua and the London School of Hygiene and Tropical Medicine – to reveal the roots of the condition.

“There is probably an occupational element. Conditions for sugarcane workers are absolutely brutal. They have to work in incredible heat – more than 40C – and they have limited personal protection against the toxic agents being used in fields. The sugarcane is also burned before being gathered and that releases all sorts of things into the air and the soil. So heat stress or pollution are possible agents,” said Caplin.

An article in the February 2015 edition of the Monitor reported on this occupational exposure concern.



Above pic: Two young boys in rural Nicaragua, photographed by Australian photojournalist Josh McDonald. The sugarcane-growing community in which they live is blighted by a renal disease whose cause remains unclear.

Source Photograph: 2017 Wellcome Image Awards

Suicide awareness for the WA resources sector

The Department of Mines and Petroleum – Resources Safety have issued Mines Safety Bulletin No. 139 which is designed to raise awareness of potential suicide risk factors for personnel engaged in the resources sector. However, the content is relevant to all industry sectors and is an extremely informative and useful document with an excellent list of references.

http://www.dmp.wa.gov.au/Documents/Safety/MSH_SB_139.pdf

Source: Department of Mines and Petroleum, 16 March 2017



Health programs a priority for workers

A recent survey of 1500 Sydney train commuters, carried out by the NSW Government's 'Get Healthy at Work' program has found that the majority of employees would like their management to provide them with health checks and programs to increase their activity during the day.

Almost two-thirds of respondents said their workplace could benefit from a workplace health program that included health checks and advice on healthy eating and ways to get more active in the workplace.

The Get Healthy at Work Program is the NSW government's free workplace health service that provides businesses with tools and support on healthy eating, weight and physical activity which includes free confidential health checks for workers.

Businesses receive support from accredited service providers who assist in developing a health program tailored to their workplace and confidential health checks for workers.

Get Healthy at Work research has found businesses with unhealthy staff are two and a half times more likely to experience high rates of absenteeism, which can add \$50,000 to a business's costs over five years.

There is also mounting evidence to support the benefits of workplace health programs, including increased staff recruitment and retention, reduced sick days and greater productivity.

Image credit: @stock.adobe.com/au/kbuntu

Source: SafetySolutions, 25 May 2017

Ergonomics in office work

Dr Richard Graveling from the Institute of Occupational Medicine in Edinburgh has prepared a comprehensive article which highlights the risks and hazards facing office workers and categorises them into four major groups, depending on their nature:

- Posture problems
- Psychosocial factors
- Environment
- Problems linked to intensity and design of the office.

The article provides guidance on the development of organisational strategies, establishing good ergonomic practices and the design of the workplace. It also includes a model computer workstation checklist.

The article is based upon one initially prepared as an EU-OSHA fact sheet.

Source: Environmental Expert News, 16 March 2017



HEAVY LIFTING RESULTS IN RETINAL DETACHMENT

According to researchers from Italy's University of Bologna and US and Swedish institutions, lifting heavy loads just twice a week can double a worker's risk of retinal detachment and the incidence rate is likely to increase as the workforce ages.

Clear Vision



Vision with Retinal Detachment / Retinal Tears



Although the link had been hypothesized decades ago it was not investigated until 2000.

In that year, Italian researchers found that a history of intense occupational lifting was more common among patients who had received Rhegmatogenous Retinal Detachment (RRD) surgery than a reference group of outpatients referred to an ophthalmological clinic, and identified higher rates of RDD among manual workers from hospital discharge records.

In their study, the researchers analysed the medical information of 49,231 Swedish men and found RRD was more prevalent in workers in higher categories of occupational lifting exposure.

The incidence rate of RRD among subjects lifting heavy loads at least twice per week, aged between 50 years and 59 years, and affected by severe myopia was as high as 7.9 cases per 1000 person-years, compared with an overall rate of 0.28.

The researchers concluded that: "As intense manual material handling is still a common exposure, the prevalence of myopia is growing worldwide, and the workforce is ageing in many Western countries, the burden of occupation-related retinal detachment might increase in the future."

Source: OHS Alert, 30 March 2017



A little less weight results in significant health benefits

The Australian Institute of Health and Welfare (AIHW) reports that if all Australians at risk of disease due to overweight or obesity reduced their body mass index (BMI) by just one point—equating to around 3 kilograms for a person of average height—the overall health impact of obesity would drop significantly.

The report also shows that the overweight and obesity burden is not equal across all population groups. For example, the lowest socioeconomic group experienced rates of overweight and obesity burden more than double the highest socioeconomic group.

Source: Impact of overweight and obesity as a risk factor for chronic conditions: Australian Burden of Disease Study, 2017

Obesity is the top cause of preventable life-years lost

A team of researchers from Cleveland Clinic and New York University School of Medicine have found that obesity resulted in up to 47 percent more life years lost than tobacco. Tobacco and high blood pressure caused similar life-years lost.

Their preliminary work presented at the 2017 Annual Meeting of the Society of General Medicine found the greatest number of preventable life-years lost were due (in order from greatest to least) obesity, diabetes, tobacco use, high blood pressure and high cholesterol.

A key takeaway is that three (diabetes, hypertension and high cholesterol) of the top five causes of death can be treated, so helping patients understand treatment options and approaches can have a powerful impact on life years.

The results also highlight the importance of preventive care in clinical practice and why it should be a priority for physicians.

Lead author, Glen Taksler, PhD said “The reality is, while we may know the proximate cause of a patient’s death, for example, breast cancer or heart attack, we don’t always know the contributing factors, such as tobacco use, obesity, alcohol and family history.

For each major cause of death, we identified a root cause to understand whether there was a way a person could have lived longer.”

Source: ScienceDaily, 22 April 2017



HEALTH - PSYCHOLOGICAL



Decrease in the thickness of the cerebral cortex in the left parietal cortex (marked in red) after psychotherapy. Credit: UZH

Study shows that psychotherapy normalises the brain in social phobia

Anxiety in social situations is not a rare problem with around one in 10 people affected by Social Anxiety Disorder (SAD) during their lifetime.

SAD is diagnosed if fears and anxiety in social situations significantly impair everyday life and cause intense suffering. Talking in front of a large group can be one typical feared situation.

A study from the University of Zurich and associated hospital now reveals that the successful treatment of an anxiety disorder alters key brain structures that are involved in processing and regulating emotions.

Cognitive Behavioural Therapy (CBT) Pivotal

In patients suffering from SAD, regulation of excessive anxiety by frontal and lateral brain areas is impaired.

Strategies aimed at regulating emotions should restore the balance between cortical and sub-cortical brain areas. Those strategies are practiced in CBT which is a central therapy for SAD.

The Zurich study investigated structural brain changes in patients suffering from SAD after a specific 10 week course of CBT. Using magnetic resonance imaging (MRI) the patients' brains were examined before and after the 10 week course.

What they found

Annette Bruhl lead physician at the University Hospital of Psychiatry said "We were able to show that structural changes occur in brain areas linked to self-control and emotion regulation. The more successful the treatment, the stronger [the] brain changes."

The research group was also able to demonstrate that brain areas involved in processing emotions were more interconnected after the treatment.

Bruhl summed up: "Psychotherapy normalises brain changes associated with Society Anxiety Disorder".

Source: Science Daily, 6 February 2017

Union calls for a national inquiry into the incidence of police suicides



The WA Police Union has called for a national inquiry into the rate of suicides involving police officers across Australia.

This has been prompted by a number of suicides among police officers with several officers across the country taking their lives recently, including one WA officer who took her own life in February.

WA Police Union president George Tilbury said "I strongly believe the issue of police suicide is peaking and a national inquiry is needed because these tragedies are occurring right across Australia."

Source: SafetyNetJournal, 26 April 2017

Doctors identify work-related stress epidemic

An international survey has identified a dramatic shift in the types of work-related health problems seen by occupational medical specialists in Australia and other countries, with “traditional” problems like lung disease being overtaken by an epidemic of stress and burnout.

The International Occupational Medicine Society Collaborative surveyed 21 of its now 36 societies across 34 countries, covering about 40 per cent of the world’s total workforce. Respondent member countries included Australia, China, New Zealand, the UK and the US.

Clear trends and challenges facing occupational medical specialists identified including:

- Increasing psychosocial stress issues – in developed countries, there has been a decline in traditional occupational health problems such as lung disease and musculoskeletal issues, while work-related mental illnesses, including psychosocial stress and burnout, have risen dramatically, the survey report says.
- The emigration of occupational health problems – a number of countries reported that “historically common occupational diseases have ‘migrated’ out of the country as production work has declined, leaving only primarily older workers needing treatment for these diseases”.
- The ageing workforce – occupational physicians in many countries highlighted the impact the ageing workforce is having on their roles.

Australian occupational physician workforce restructuring

The global survey notes the steady change in employment models for occupational physicians and cited Australia and New Zealand as being at the forefront of this trend.

It says the number of occupational physicians employed directly by large organisations in Australia and New Zealand has decreased substantially, and their roles have been outsourced to private consultants or corporate occupational health service providers.

The report says this trend was driven by restructuring and cost-saving initiatives by large employers, and the growth of corporate health organisations providing occupational medical services to a wide range of employers.

Source: OHS News Alert, 21 March 2017

Mental health concerns in young UK school teachers

The National Union of Teachers UK has conducted research and found that mental health concerns among young teachers could force them to quit the profession.

More than 77% said their morale had declined since starting teaching and a third of newly qualified teachers specifically said they had not received adequate support in their first years in the profession.

General Secretary Kevin Courtney said “Mental well-being is a key issue for young teachers and a decent work/life balance is therefore essential to facilitating good mental health. Even more disturbingly, data on occupational suicides published by the Office for National Statistics in March shows that female primary and nursery school teachers have a heightened risk of suicide – they are 42% more likely to commit suicide than the average woman.”

The survey found 84% of teachers say that they frequently worry about work problems when they are not working and just 11% say that they are able to relax at home. Nearly 60% say their job has adversely impacted on their mental health in the last 12 months and over half say it has a detrimental impact on their physical health.

Teachers report turning to medication, alcohol, tobacco and caffeine to help them cope with their job.

The union leader called for additional ‘mental health first-aid’ for staff, but added that prevention is better than cure and “the driving factors behind the rise in teacher stress, including excessive workloads and working hours need to be effectively addressed to tackle the growing epidemic of low morale, burnout and stress which is continuing to make teaching an increasingly unattractive profession.”

Source: TUC Risks 796, 22 April 2017



SLEEP / FATIGUE



Pilot burnout crisis in the UK

The UK pilots' union BALPA says that airlines are not doing enough to address fatiguing rosters and this will lead to pilots suffering "burnout". The head of flight safety, Dr Rob Hunter, warned that fatigue remains a huge issue for the industry, and not enough is being done to tackle the problem.

One year on from the introduction of EU-wide pilot duty hours regulations, Dr Rob Hunter, BALPA Head of Flight Safety and an aeromedical expert, has warned that fatigue remains a huge issue for the industry, and not enough is being done to tackle it, especially 'burnout'.

"Pilot fatigue is one of the biggest threats to safety, it acts powerfully to increase the risk of pilot error," he said. "Fatiguing rosters are not just a problem in budget airlines but rather across industry and need to be addressed. The future health of UK pilots is at stake if changes are not made soon."

Source: TUC Risks, 790, 4 March 2017

NOISE

Comprehensive new noise control information available

Occupational noise is produced in many workplaces via loud processes and items of plant and equipment. In Victoria, **it is estimated that 10% of workers believe they are exposed to loud noise on a daily basis, yet only one in 4 eligible workers put in a workers' compensation claim for noise induced hearing loss (NIHL).**

Hearing loss occurs most rapidly in the initial years of exposure to loud noise. To reduce exposure to hazardous noise there needs to be a shift in focus from PPE to higher order controls says Worksafe Victoria.

To encourage this shift, they have produced a series of guidance documents (all PDF) providing information about Noise Control:

A step by step approach

- Circular saws
- Compressed air noise
- Enclosures, barriers and screens
- Fan and ventilation noise
- Grinders
- Hearing protection
- Impact, vibration and materials handling noise

The documents are available from Worksafe Victoria's website.

Source: SafetyNetJournal 402, 10 May 2017

HAZARDOUS MATERIALS

United Nations experts call for global treaty to control/eliminate pesticides

Two United Nations experts are calling for a comprehensive new global treaty to regulate and phase out the use of dangerous pesticides in farming and move towards sustainable agricultural practices.

The experts told the Human Rights Council in Geneva that widely divergent standards of production, use and protection from hazardous pesticides in different countries are creating double standards, which are having a serious impact on human rights. They pointed to research showing that pesticides were responsible for an estimated 200,000 acute poisoning deaths each year. The overwhelming number of fatalities, some 99 percent, occurred in developing countries where health, safety and environmental regulations were weaker.

"It is time to overturn the myth that pesticides are necessary to feed the world and create a global process to transition toward safer and healthier food and agricultural production."

Source: TUC Risks 791, 11 March 2017

More evidence links welding fumes to cancer

According to Harvard University's Professor David Christiani more priority needs to be given to protecting the world's estimated 111 million welders and other workers from exposure to toxic welding fumes.

Seventeen scientists from 10 countries met recently at the International Agency for Research on Cancer (IARC) in Lyons France to review scientific literature and evaluate the carcinogenicity of several welding chemicals to humans.

The working group found new evidence to support the conclusion that welding fumes are a likely cause

of lung cancer in humans, possible cause of kidney cancer, and definite cause of melanoma of the eye. In addition to fumes, welding can expose workers to radiation and asbestos which are known to cause cancer.

Two other chemicals evaluated at the meeting – molybdenum trioxide (sometimes used in welding) and indium tin oxide (used to make computer screens) – were determined to be possible cancer causing in humans.

Source: TUC Risks 797, 29 April 2017

UN treaty 'discredited' as asbestos lobby prevails

At the UN-organised conference in Geneva on 3 May, a small minority of countries with commercial interests in the production and usage of chrysotile asbestos – India, Kazakhstan, Kyrgyzstan, Russia, Syria and Zimbabwe – vetoed chrysotile's addition to the Rotterdam Treaty's 'prior informed consent' list, a measure that would require exports to be accompanied by a health warning.

It requires a unanimous decision of government representatives for a substance to be listed.

Addition of chrysotile to the list cannot now be considered until the next conference, in two years' time.

Sharan Burrow, general secretary of the International Trade Union Confederation (ITUC) said "Another generation will be blighted by asbestos disease as a result of past exposures. This criminal cabal of cancer pushers must be put out of business and brought to justice. We will do all we can to make sure this happens."

The highly toxic pesticide paraquat was another victim of the unanimity requirement, again missing out on listing.

The Convention's expert group had said both substances met all the requirements for listing.

Source: TUC Risks 799, 13 May 2017

Substituting, removing exposures to hazardous substances the key to protecting workers

The Mayo Clinic notes that more than 300 workplace materials may cause occupational asthma, including animal substances, enzymes and metals.

About 11 million workers are exposed to at least one agent associated with occupational asthma, according to the US-OSHA. And a report from the Centers for Disease Control and Prevention, published in the Dec. 2 issue of Morbidity and Mortality Weekly Report, concluded that as many as 2.7 million US workers may have asthma caused or aggravated by workplace conditions.

Occupational asthma can occur when a worker is exposed to on-the-job substances such as dust, chemicals or mould, US-OSHA states. A worker can be exposed through breathing or skin contact.

Measures for protecting workers can include training, improved ventilation, proper housekeeping and replacing substances with less harmful alternatives – or, if that is impossible, minimising exposure through engineering controls.

Source: Safety and Health Magazine, 26 March 2017



CANCERS

New hope for cancer patients

A miracle drug that saves lives by “dissolving” cancer without any chemotherapy has been successful in NSW trials. Patients are not only living longer but are living better, free of chemotherapy’s nasty side-effects.

Westmead Hospital (NSW) oncologist Associate Professor Rina Hui said “What we are seeing is a real game-changer for the way we will treat lung cancer, the No. 1 cancer killer in the world. We have really provided fresh hope to these people. It is truly an exciting and amazing time.”

Professor Hui’s patients were part of a global study into lung cancer and Keytruda, currently used successfully with melanoma patients. During the trial the drug stopped lung cancer spreading in almost half the patients after 12 months, making it three times more effective than chemotherapy.

The study was run with patients whose advanced cancer had spread outside the lungs and they had high levels of a marker that indicated their cancer cells were “disguised” as healthy cells.

The ground-breaking results were presented recently at the European Society of Medical Oncology Congress in Copenhagen.

The Victorian government has provided a grant of \$2.25 million to the Peter McCallum Centre and the Olivia Newton John Cancer Wellness and Research Centre to undertake an evaluation of cancer drug candidate BNC105 in combination with Keytruda.

This will be the first clinical assessment of the combination of Keytruda with the vascular disrupting agent BNC105. It will be tested in patients with advanced cases of melanoma, who were unresponsive to standard treatment.

Keytruda approved for lung cancer treatment

The Therapeutic Goods Administration has now approved the chemotherapy-free drug Keytruda for use in the treatment of lung cancer, including mesothelioma. The approval comes after a trial involving 300 people. The cost of the drug is extremely high, but the pharmaceutical company behind the drug has said it is working with the Federal Government and lung cancer experts to have the drug added to the Pharmaceutical Benefits Scheme.

Source: SafetyNetJournal, 397 15 March 2017

New drug being trialled in Melbourne

A new drug developed in Melbourne has been shown to shrink tumours in the laboratory. There are now plans for a human trial to treat mesothelioma. Olivia Newton John Cancer Research Institute senior clinical research fellow, and Austin Hospital oncologist specialising in mesothelioma, Associate Professor Tom John said the drug was an “antibody drug conjugate”. It binds to a target on the surface of the cancer cell and releases little packets of chemotherapy - destroying just the bad cells. The team, which includes Professor Andrew Scott, Associate Prof Hui Gan, and Dr Puey Ling Chia, aims to begin human trials this year. The Cancer Council Victoria has awarded two research grants totalling \$700,000, one to the team from ONJRI, and another to Peter MacCallum Cancer Centre.

Source: SafetyNetJournal, 397 15 March 2017

Cancer at work

Dr Jukka Takala, a world expert on work-related cancer, considers it necessary to establish a global program for eliminating carcinogens in the workplace.

“Cancer is the primary cause of death in the workplace” he stated on 16 December 2016 at the European Trade Union Institute (etui) monthly forum.

According to figures from a recent study, almost one in every three cases of lung cancer and almost one in five leukaemia cases can be attributed to occupational cancer.

Source: etui news, 19 December 2016

Workplace cancer-causing agents focus of new health campaign

Thousands of cancer cases are linked to the workplace each year, and the Cancer Council says it is time for stronger health and safety practices.

An estimated 3.6 million Australians are exposed to cancer-causing agents every day at work.

The most common workplace-related cancers in Australia include mesothelioma, bronchus and lung cancer, nose and nasal sinus cancer, leukaemia and cervical cancer.

“These figures warrant a workplace health and safety check-up by both employers and employees. It’s critical that they are aware of all cancer-causing hazards and behaviours,” said Cancer Council Queensland chief executive Chris McMillan.

The Cancer Council Queensland has launched Occupational Cancer Risk Fact Sheets for employers and employees, providing vital information on cancer risks and their control.

Source: Courier Mail, 28 March 2017

Two thirds of cancers are caused by ‘random’ cell divisions

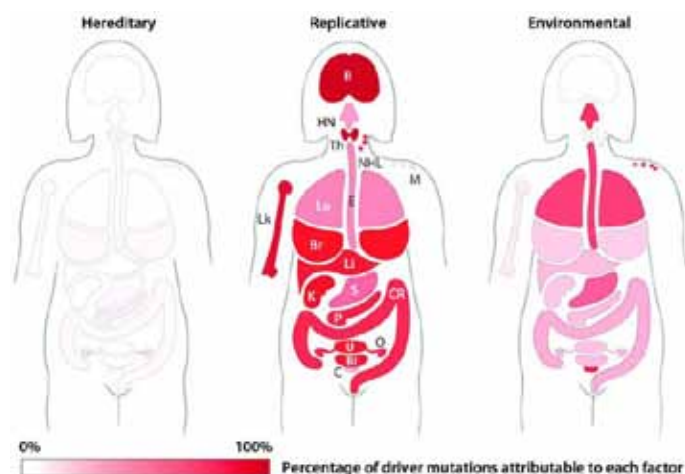
A study published in *Science* in March evaluated cancer occurrence in 69 countries, including Australia, covering 4.8 bn people has found that approximately two-thirds of all cancers are caused by random errors during normal cell division.

Assistant Professor Cristian Tomasetti of the Johns Hopkins University School of Medicine said that “our research has broken the paradigm that most cancers are environmental or inherited.”

The study reviewed 32 types of cancer and found that about 66 percent of cancer mutations result from random DNA copying errors; 29 percent can be attributed to environmental factors, and the remaining 5 percent are caused by inherited factors.

This means that about one-third of cancers are preventable, and ensuring workers are not exposed to carcinogens remains important.

Source: Biosciencetechnology News, 29 March 2017



For each of 18 representative cancer types, the schematic depicts the proportion of mutations that are inherited, due to environmental factors, or due to errors in DNA replication (i.e., not attributable to either heredity or environment). The sum of these three proportions is 100%. (Image: Johns Hopkins University)

Chemicals agency capitulates to agrochemical lobby

The global food and farming union IUF has criticised a ruling by the European Chemicals Agency (ECHA) that the toxic herbicide glyphosate, the active ingredient in Monsanto's Roundup, is not carcinogenic.

The IUF says that "substantial evidence" from independent researchers was disregarded by ECHA in a 'weight of evidence' approach which prioritises 'risk' over hazard elimination.

The ECHA report was issued two days after internal Monsanto documents released by a United States court documented the company's consistent efforts to produce glyphosate-friendly studies and squash independent reviews by government regulatory bodies.

The court released the documents, which reveal the extent of collusion between Monsanto and the Environmental Protection Agency, in response to a lawsuit brought by agricultural workers linking glyphosate exposure to non-Hodgkin's lymphoma, a blood cancer.

The International Agency for Research on Cancer (IARC) said its evaluation of glyphosate is not affected by the ECHA review, and the 'probable human carcinogen' designation will remain.

A 23 March 2017 paper in the Journal of Epidemiology and Community Health is highly critical of the science used to justify glyphosate's approval and called for an 'urgent' review.

"It is incongruous that safety assessments of the most widely used herbicide on the planet rely largely on fewer than 300 unpublished, non-peer reviewed studies while excluding the vast modern literature on glyphosate effects," it noted.

"After a review of all evaluations, we conclude that the current safety standards are outdated and may fail to protect public health and the environment."

Source: TUC Risks 794, 1 April 2017

Scientific Committee links to company sectors

A report published in late February in the French daily newspaper Le Monde revealed that 15 of the 22 members of the Scientific Committee on Occupational Exposure Limit Values have ties with companies in sectors likely to be affected by the European Commission's plans to adopt new occupational exposure limits for certain carcinogens or mutagens at work.

The paper established the links between the 15 experts and companies including BASF, Shell and Monsanto or trade lobby groups.

Source: TUC Risks,

Push to ban asbestos in Brazil

A draft Bill delineating a roadmap to make the transition from a national asbestos policy based on the controlled use of asbestos to one banning mining, manufacture, import, storage and transport of asbestos fibre and products containing asbestos within a strict phased time scale has been submitted to the Brazilian Congress.

Citing the global consensus regarding the proven risks posed by asbestos exposures, the proposal will, if approved, prohibit all asbestos use, sales, marketing, storage, import and export within four years.

Source: Safety Net Journal, 397, 15 March 2017



Union calls for tighter rules on reproductive and cancer hazards at work

A key European Parliament committee has backed union calls for tighter rules on reproductive and cancer hazards at work. On 28 Feb the committee accepted an amendment that would bring reproductive hazards under the scope of a revised law. It also accepted that an occupational exposure limit for crystalline silica of 50 ug/m³ should be phased in, half the level sought by the industry lobbyists.

Speaking after the vote, Marita Ulvskog, vice-chairperson of the committee said:

"The Committee is proposing to widen the scope of the EU legislation on the protection of workers from carcinogens or mutagens at work, to include reprotoxic substances. We also need to ensure that workers exposed to these harmful substances benefit from lifelong monitoring. It does not matter how long you have been exposed to these substances, you can still develop life-threatening diseases long after you have ended your job."

Source: TUC Risks, 790, 4 March 2017

ILLEGAL / LEGAL DRUGS

ONE HALF OF CANADIAN EMPLOYERS SUSPECT WORKERS ARE UNDER THE INFLUENCE OF DRUGS OR ALCOHOL



According to a recently released survey by a Canadian law firm, 53 percent of employers nationwide have suspected that a worker was under the influence of alcohol or non-prescription drugs while at work in the last year.

Almost one-quarter of employers surveyed knew with 100% certainty that one or more workers had been under the influence of alcohol or drugs while at work in the last year. Moreover, 60% of responders' managers and supervisors are not trained to identify workers that may be under the influence.

The survey also found that 79.9% of respondents work at organisations that do not have an alcohol or drug policy for random alcohol and drug testing for employees in safety sensitive positions.

While the majority of Canadian organisations are aware of legal OHS requirements, many are not equipped to enforce them. The initial areas of concern centre on the OHS policies and programs themselves; the use of alcohol and drugs in the workplace; harassment and violence in the workplace; and OHS inspections and enforcement.

Source: Cos Mag, 25 April 2017

WORKERS' COMPENSATION

Workers' compensation claims on the decline, report shows

Workers compensation statistics have been released in a new report, which shows that claims are on the decline.

The Australian Workers' Compensation Statistics 2014–15 report provides an overview of preliminary claim data for 2014–15, as well as an analysis of the claims.

Key findings from the report include:

- the rate of serious claims has fallen by 33% between 2000–01 and 2013–14;
- the median time lost from work rose by 33% to 5.6 working weeks between 2000–01 and 2013–14;
- labourers had the highest rate of workers compensation claims in 2014–15;
- the healthcare and social assistance industry had the highest number of claims in 2014–15 and the agriculture, forestry and fishing industry has the highest rate.



Source: Safety Solutions, 7 April 2017

New app to assist injured workers in Queensland

WorkCover Qld has produced a new app to help workers track their compensation claim on-the-go anytime, anywhere. The Worker Assist app has been designed for injured workers and gives access to the most important information about their claim.

The app allows claimants to update their personal details, bank details, tax file number and notification preferences to help claimants keep track of everything. They can view past and upcoming medical appointments.

Notifications from their smartphone will let claimants know when they have an appointment and provide feedback about their appointment.

Source: WorkCover Queensland, 28 April 2017



Occupational Health Society of Australia (WA)

Seminar : Improving Occupational Health for West Australians Thursday, 13 July 2017

Cambridge Room, City West Receptions, 45 Plaistowe Mews, Perth
8:30 am – 12:30 pm

Registration to Attend

REGISTRANT

Title (Mr, Mrs, Dr etc)			
Firstname		Surname	

MAILING DETAILS

Company			
Position			
Address			
Suburb		Postcode	
Mobile			
E-Mail			

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REGISTRATION FOR.

- Student Registration \$ 50
 General Registration \$100
 OHSWA(WA) Member Registration \$ 75

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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.

Visit www.ohswa.marcsta.com for more information.



Occupational Health Society of Australia (WA)

Members

Ms Joyce Blair	Next Health Group	Dr Nicol Ormonde	Ormonde Health Consulting
Mr Dean Butler	Avon Valley Physiotherapy	Ms Zelica Palamara	Next Health Group
Mr Forbete Chenwi	Safety Agency Cameroon	Mr Craig Power	Right Solutions Australia
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Ms Kym Kaptein			
Ms Sheryl Kelly	CGU Workers Compensation		
Mr Lance Keys	Anglo American		
Mr David Lampard	WA Police Union		
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