# Modernising Work Health and Safety Laws in Western Australia

Submission by the Cancer Council of WA

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## **Submission template - blank**

This template that allows you to address any aspect of the model WHS Act. If you wish to comment on a large number of the MAP recommendations you should consider using the template that has all of those recommendations pre-filled.

## Questions for you to consider:

- 1. What is the likely cost to implement a specific proposal?
- 2. What is the benefit to workplace participants?
- 3. Is a specific recommendation likely to be effective in achieving safer workplaces?
- 4. Are there any unintended consequences of a proposal?
- 5. If a new requirement is proposed, what are the costs and benefits?

Recommendation
number in the
Consultation Paper
and/or section number in
the model WHS Bill.

## Comment (including costs and benefits)

#### #9

Amend the meaning of serious injury or illness to include immediate treatment as an in-patient without reference to a hospital.

CCWA supports this amendment but seeks further clarification in respect of the duty to notify of notifiable incidents. In particular, it is not clear whether 'serious illness' includes long-latency illnesses such as cancer. This does not appear to be supported by the definition of 'serious illness' in the model WHS Bill for WA, nor by the model WHS Regulations developed by Safe Work Australia.

Similarly, we seek clarification on the definition of 'dangerous incident' and uncontrolled exposure to carcinogens. Some of these incidents could be captured by s.37(a) 'an uncontrolled escape, spillage or leakage of a substance,' but further guidance is needed to identify the circumstances in which exposure to carcinogens will be considered a notifiable incident.

In particular, we question whether the definition would capture the uncontrolled production of carcinogens and exposure to these by-products, such as silica dust, diesel engine exhaust and welding fumes.

#### #10

Include incapacity to work

CCWA supports the inclusion of a clause that is intended to capture serious work-related illnesses

for 10 or more days as a category of serious injury or illness	and injuries that may not require immediate treatment. This would include work-related cancers, which typically have a long latency period between the carcinogenic exposure and the onset of symptoms.
#12 Clarify the power of HSRs to provide assistance in specified circumstances to all work groups at the workplace.	CCWA is strongly supportive of provisions that facilitate the effective participation of workers and the representation of their interests in work health and safety. Elected HSRs are empowered to monitor compliance with the WHS Bill, investigate complaints from work group members about health and safety matters, and inquire into anything that appears to be a risk to the health or safety of work group members. In this respect, the HSR has power to draw attention to the exposure of workers to carcinogens, and to direct that unsafe work cease.
	The power of the HSR to provide assistance in certain circumstances should be broad, and so should include all work groups of any PCBU at the workplace.
	It is also important that the HSR has the right to seek assistance or advice from experts who are external to the organisation. For example, the HSR may seek advice from experts in occupational exposure to carcinogens, and controls to minimise these risks.
Other	The modernisation of workplace health and safety laws in Western Australia provides an opportunity to minimise the exposure of workers to carcinogens in the workplace. CCWA is keen to ensure that Western Australian workplaces are held to the highest standard based on international evidence.
	Carcinogens associated with occupational exposure include, but are not limited to, radiation (including solar ultraviolet radiation), asbestos, metals (arsenic, chromium, nickel), metalworking fluids, petrochemicals and combustion products, some pesticides, diesel fumes, wood dust, reactive chemicals and solvents. In addition, outdoor workers remain exposed to secondhand tobacco smoke.
	Australians are highly exposed to carcinogens in the workplace. The Australian Work Exposures Study (AWES) found that 37% of respondents

were assessed as being exposed to at least one carcinogen in the workplace, with males and regional workers most commonly affected. On extrapolation, this equates to 3.6 million workers being exposed. Solar UV radiation was the most frequent exposure, affecting 2 million workers.

Due to the long latency period between exposure to carcinogens and development of cancer, it can be difficult to estimate the proportion of cancer cases that are work-related. This data is not collected routinely at a national level. However, it is estimated that every year in Australia 5,000 invasive cancers and 34,000 non-melanoma skin cancers are caused by occupational exposures.

CCWA believes the model WHS Bill provides a strong framework for minimising exposure to carcinogens in the workplaces. We look forward to having the opportunity to comment on draft Regulations and Codes of Practice, as these will govern the use of restricted and prohibited carcinogens, and set standards for managing risks arising from asbestos, secondhand tobacco smoke and solar UV radiation.