

the monitor

Keeping all those with an interest in OHS informed of current developments in workplace health and safety nationally and internationally



Issue 1 Vol 38 – February 2025



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OHSA Inc. COMMITTEE 2025

EXECUTIVE

President Les Vogiatzakis – DGaS Services
Vice President Dr Amy Bright - OMEMA
Secretary Ali Martins – OH&S Consulting
Treasurer - Joint David Lampard – Retired & loving it

COMMITTEE

Dr KC Wan – Occupational Physician
Lance Keys – Anglo American
Dr Celine Murphy – CMC
Peter Nicholls – Mine Safety & Training

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Report from the Editor

Happy 2025 Members! I know that is already the end of February, but we have got a BIG year planned with some dynamic speakers on some red hot 'on topic' presentations. They include:

- Menopause - the hidden workplace health and safety issue that's impacting your people
- "It Pays to Care" – a guideline on how to manage Injury Management. A social model
- "Pneumoconiosis Diagnosis & Assessment for Permanent Impairment – WA Requirements"
 - Combined online presentation with MOHPA
- Use of AI application in OSH – pluses & pitfalls
- Mine Safety and Training Site Visit – Underground Simulator

We hope to see you participate in at least one of these events.

If there are any further topics or changes you would like made to the Monitor, please forward your suggestions to me at ohswa@outlook.com.au

The Society is also planning on reintroducing the OSH Student Award of Excellence, but I will wait until we have finalised the details to say anything more.

Our long serving Treasurer and ex President Dave Lampard is finally passing on the baton...but it is all a bit of a process. Please have a read of our special profile on Dave who has been awarded Life Membership.

A warm welcome to our newest committee member Dr Celine Murphy and our new Treasurer Peter Nicholls.

Play Safe,

Alison Martins
Editor/Secretary

New & Renewed Members

A special and warm welcome to New Members to the Occupational Health Society of Australia Inc. and for returning members - **WELCOME BACK**, we've missed you!

The following are new and renewed members since the last Newsletter in November 2024.

New Members – Dr Andrew Van Ballegooyen

Renewed Members – Dr Peter Connaughton

The Committee are actively following up personally with non-financial members as we lost many during the COVID years when we were unable to facilitate face to face events and had a hiatus in activity. We are still recovering from those dark years and are now actively recruiting new members and urge all our existing membership to spread the word on the benefits of joining the lowest cost Professional Association in Australia that singularly aims to share OHS information and provide forums for networking.

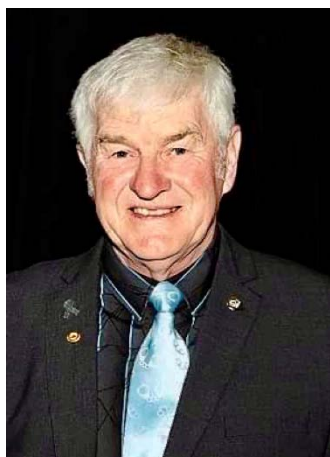
We invite you all to provide us with feedback on what "Hot Topics" you would like explored by the Society as a Professional Development Event, dynamic speakers that you have been exposed to relevant to OHS and local venues that are suitable and central that will entice you to attend the next event.

We have attached a Membership Application form at the back of this issue of the Monitor. Please feel free to share this membership application form with your colleagues and likeminded OHS professionals. We are the sum of our whole and need growth to allow us to continue with a professional, on point, relevant to member interest, topical and engaging rigour.

Does anyone know an Amberley Wright? We have received \$\$ but nil details. Please contact the Secretary.

MEMBER PROFILES

Life Membership Awarded to David Lampard



At the November AGM, Mr David Lampard (*ex President, Secretary and Treasurer*) was nominated for Life Membership of OHSA Inc. and was endorsed unanimously.

Life Membership of the Society is the highest award that can be bestowed on a member. The award is thoroughly deserved and is a mark of appreciation for the outstanding service rendered over a long period since the Society was incorporated in 1978.

At the AGM in November 2024, Dave advised the other OHSA Executive Committee Members that he was standing aside from the Treasurer's role and would not be renominating for any committee positions. This ends a 20-year member and committee involvement with the Occupational Health Society of Australia (WA Branch) Inc. (The Society).

The following is a personal reflection.

During 2005 to 2017, I was the Safety Officer for the WA Police Union. Being able to glean information from qualified professionals in the health and safety industry I found very useful. It was also useful for the Society, as policing is a unique and dangerous occupation, and it wasn't until August 2023 that sworn police officers were covered by OHS legislation.

In 2005 the Society was thriving with numerous events being run. The same applied to the Safety Institute of Australia I also joined that organisation, which was more angled into safety and involved employer and employee representative organisations.

I have no idea why, but suddenly, the Society began to struggle and were battling to maintain members or relevance. It was very close to folding on many occasions and always struggled to achieve a quorum at the Annual General Meetings (AGM). In June 2011 the Safety Institute of WA Ltd (SIWA) approached the Society and after negotiations with the then President Peter Rohan an affiliation agreement was agreed. Not long after the SIWA folded and gifted their remaining funds to the Society. This injection of funds made it harder for the Society to fold.

The struggles continued, however in 2013 the Society agreed to MARCSTA assisting in the governance of the Society. This proved to be very valuable with Pat Gilroy taking on the Secretaries role with access to administrative staff. Thanks Pauline.

At the eventful 2018 AGM held in April and after the meeting decided to kick on with the Society Pat retired and the then President Joe Maglizza did not re nominate. I took on the role of President. I had been either Secretary or Treasurer since 2009.

The core committee members who had been around for many years managed to just keep the Society going and held a couple of events each year whilst established members left and some new members were recruited.

The new committee hit the ground running at the first committee meeting with previous and new committee members eager to stabilise the organisation which included governance, revising the constitution and most importantly providing value for members.

So how did I become interested in worker safety and health.

Career #1 I started work at 15 in 1965 as an apprenticed Carpenter and Joiner. In that period there was no specific OHS legislation in the UK or for that matter anywhere and protection was provided by various disjointed separate pieces of legislation such as the Factories Act. etc, My trade exposed me to dangerous machines, the debris from those machines, asbestos used extensively in a number of building products, creosote used to protect rough outdoor timber such as fences and pink primer paint used as the first coat on window and doors frames. This paint contained lead. Australian white ants would not touch it.... *they would know better.*

One nasty hazard that had not been anticipated was the use of a substitute timber called Parana Pine from the candelabra tree in Brazil used to make timber kitchen draining boards as the supply of Teak was running out. When machined the Parana pine's dust floated in the air and if ingested or breathed in could cause bleeding from the nose. It was soon outlawed, and the timber is now an endangered species. Thank you, Stainless Steel.

Moving out of the joiner's workshop into the Carpenters arena brought along different hazards. We would bend and shape lead for roof flashing. Work in confined spaces handling all sorts of nasties and work at heights erecting timber constructions with no instructions, training or harnesses. Just before we emigrated, I even pushed a handcart loaded with window frames down a main street in Lytham Saint Anne's. I continued my trade in Australia for two years before joining the WA Police (WAPF)

Career #2 came as a surprise, and I could not fathom why some blatantly obvious risks and hazards had not been subject to any form of control measures. This was 11 years before OSH legislation for the general workforce and sworn police officers would remain exempt for a further 20 years as they were labelled servants of the crown not employees or workers.

To change or improve things the only way was to use the WA Police Union (WAPU) resources through branch meeting motions supporting any departmental proposal that had been submitted. Some of the glaring hazards were, single officer patrols, often with no reliable form of communications, motorcycle crash helmets that offered little protection in a crash or from the sun, using asbestos gloves to free occupants from a burning vehicle and no earmuffs when firearm training.

Even though I was only a baggy bottomed second year constable I managed to persuade the bosses that these issues need to be addressed and covered in the Police Force Regulations and Police Manual Policies. In the 1970s police worked atrocious hours of duty, probably only second in health concerns after doctors and nurses.

Night shifts were two weeks back-to-back often with single split weekly leave days and shortchange covers. In 1996 I was elected a Councillor then Director of WAPU on return from 14 years country service and took on the responsibility of occupational safety and health. The next eight years was spent preparing for inclusion of sworn police in the OSH legislation resisted by the WAPF and the conservative side of politics.

In 2004 we achieved this protection which coincided with my retirement from the WAPF which in turn led me to **career #3**.

I was appointed the Safety Officer for the WAPU and had been fortunate to have been one of the first participants in the WAPF OSH Managers Course, completed just before I announced my retirement.

OSH Inclusion was a real challenge for the WAPF hierarchy the WAPU had to be constantly vigilant and hold the WAPF management, government and WorkSafe to account on many occasions. Unlike any other employee or worker in Australia WAPF sworn police could not invoke the protection of Sec 26 of the Act and refuse to work in dangerous operations due to Sec4A of the Act. This meant I had to press the Police to meet their obligations to remove, mitigate or engineer out as many risks as possible.

Just before I retired from the Police Union in November 2017, we were still fighting to prevent similar legislation carrying on into the Model Work Health legislation.

The last 13 years were interesting, challenging and mainly rewarding, especially working with my counterparts in other police jurisdictions around Australia through our association with the Police Federation of Australia. (PFA).

Most members would be aware of the everyday hazards and risks faced by police and in most cases, they are well trained to deal with these issues. However, it is the intangible events that presented the biggest challenges;

- Bullying
- Fatigue
- Hours of Duty, rosters and lengthy commutes
- Workload and stress
- Poor diets often no opportunity to take a meal break
- Substandard and insecure country housing
- A multitude of PPE and policy shortcomings
- Conveyance of vulnerable detainees'

In 2014 I was the WAPU Representative on the PFA Safety Committee which produced the Good Practice Code for Managing Risks in Policing. Safe Work Australia and the Police Commissioners through their Australia and New Zealand representative body were not impressed and had hoped to produce a diluted version.

In 2012, whilst working at the WAPU I had become very interested in police union history and as the WAPU was the first in the world formed in 1912. I decided to write a book on the history titled "Fruits of Our Labour" which

covers the various gains and improvements made over the century.

On invitation from Janis Jansz, I made presentations at the Curtin University and steered some degree students through their studies offering unusual subjects to study.

Incorporated in 1978 the original single page Constitution was amended in 1999, re written to comply with the new model rules legislation in 2018 and changed once again in 2023 resulting in the new name of Occupational Health Society of Australia Inc. A simple change that hopefully will not cause too many bureaucratic problems.

Why was involvement and membership of the OH Society, Safety Institute of Australia (SIA) and International Commission on Occupational Health (ICOH) Working Time Society (WTS) so important? I needed to source sufficient professional knowledge to challenge my peers in the WAPF and on occasions WorkSafe or the Minister for Police.

How has the Society got the message across to members? In the main through excellent articles and research in the Inside Story, then the Monitor that all members are emailed for free. In addition, I will list some of the fantastic events held and delivered by experts in their respective fields.

- ✓ August 2000. Auditing OHS Management Systems, Venue Subiaco
- ✓ April 2006 WorkChoices and Impact on OHS Legislation Venue. Perth CBD
- ✓ December 2008 30th Anniversary, Venue East Fremantle
- ✓ May 2012 Dangers of Clandestine Drug Laboratories, Venue West Perth
- ✓ May 2015 Injury Management Conference, Venue Burswood
- ✓ July 2015 Major Health Related Initiatives WHS Legislation, Venue Bentley
- ✓ July 2017 The Future of OHS Legislation Venue West Perth
- ✓ July 2018 Pre claim prevention long claim Workers Comp, Venue West Perth
- ✓ September 2018 40th Anniversary, Venue Bentley
- ✓ August 2019 Health Hazard Prevention Pilbara Mould, Venue West Perth

- ✓ July 2020 Member Fellowship and Fish and Chips, Venue West Perth
- ✓ September 2020 Bradford Fire-Hillsborough Crush, Venue West Perth
- ✓ March 2021 Qld Ammonium Nitrate Explosion, Venue Teams/Zoom
- ✓ September 2021 Sec 26a Liabilities Duties and Ethics, Teams/Zoom
- ✓ April 2024 Monitoring Health and ILO Chest X ray reading, Venue Redcliffe
- ✓ August 2024 PFAS, Venue West Perth

I close on wishing all future executive committee, general committee and members the very best for the future and was very honoured when made life member of the Society (number four) at the 2024 AGM.

On behalf of the OHSA Inc. Committee, present and past members, we thank and wish Dave and his wife every happiness and enjoyment in their future pursuits.

At the next event in 2025, Dave will be formally presented with his Life Membership Certificate and Badge.

Honorary Memberships

In November 2024 at the AGM, the following international medicos were nominated for Honorary Memberships and passed by consensus. These individuals assume international leadership roles in Occupational Health and will greatly assist in marketing of the Society internationally. Honorary Memberships were awarded following the AGM.

DR WILL PONSONBY FFOMO FRCP



Past President of the UK Society of Occupational Medicine, Independent Occupational Medicine Consultant, Honorary Senior Lecturer at the University of Manchester.

He qualified in Medicine Birmingham UK 1986. Trained in General Practice and Emergency Medicine. 1996 he ran

the medical service for AIOC/BP in Baku Azerbaijan. ISOS Regional Medical Director for Russian and Kazakhstan 4 years.

2002 UK, trained and board certified in Occupational Medicine and worked for Shell UK looking after the North Sea offshore workforce. 2006 he transferred to The Hague for Shell, Corporate Health Adviser for Exploration and Production International.

2010 Shell Regional Manager for the Middle East and Africa based in Dubai including Health Management of the Iraq projects. He joined Rio Tinto as Head of Health in August 2015, based in London & Singapore.

President of the UK Society of Occupational Medicine 2018/2019. Senior Lecturer in Occupational Medicine University of Manchester. OH consultancy practice 2019 onwards. Clients include; Transport for London; Kimberly Clark; and Glencore. Course Director i-heed diploma in Occupational Medicine RCPI.

DR KENJI SAITO MD, JD



Professor Dr. Saito is immediate Past President of the American College of Occupational and Environmental Medicine and Past-President of the New England College of Occupational and Environmental Medicine.

As assistant clinical professor at Dartmouth College, University of New England and Adjunct faculty at the University of Pennsylvania and Instructor at Harvard University, Kenji enjoys training the next generation of leaders in Occupational Health, Safety, Well-being, Leadership and Organizational Development, Digital health, Innovations, Data analytics, Entrepreneurship, Medico-legal consultation and Bioethics.

Growing up as a sushi chef in a small family business kindled Kenji's entrepreneurial spirit where he is currently involved with several startups in digital well-being, culinary and lifestyle medicine platforms in the Boston, Las Vegas and Los Angeles area and with environmental remediation technology in the Miami area.

He is also a consultant, advisor for employee health and wellness to several national and global companies in the Consumer Products, Marketing, Transportation,

Manufacturing, Nutraceutical/Pharmaceutical industries, and worked with various Government and Regulatory Agencies like State Licensing Board, OSHA, NIOSH, EPA, etc.

As a physician, he continues to practice clinical occupational health, seeing pilots as a senior medical examiner for the FAA and as an attorney, he is barred in the Commonwealth of Pennsylvania.

During his spare time, he enjoys serving as one of the founding board members for Kids' Chance of Maine, Maine Medical Association and House of Delegate to the American Medical Association. Dr. Saito is also the Global Medical Director of Owens Corning and previously Sr. Director of Global Wellness at P&G.

DR SHAWALUDIN BIN HUSIN OHD



Dr. Shawaludin has a Medical degree from Universiti Sains Malaysia and a Master degree in Community Health Science (Occupational Health) from Universiti Kebangsaan Malaysia. He also has a Postgraduate Certificate in Civil Aviation Medicine (ICAO), Certificate on Hyperbaric and Underwater Medicine (IMCA). He is a registered Occupational Health Doctor (DOSH) and an Approved Medical Examiner (AME) by Oil and Gas UK.

He is the president of the Malaysian Society for Occupational Health and Safety

Dr Shawaludin has vast experience and contribution in the Occupational Health and Safety field in Malaysia and at the international level (Asia-Pacific Occupational Safety and Health Organization, (APOSHO) and Leads its Occupational Health & Wellbeing Committee for Asia Pacific Region. And great networking with other OH professionals especially in Asia Pacific, Greece, North Macedonia, Spain , Jordan, UAE, Morocco , Turkey and UK. Other than that, he is a member of the International Commission for Occupational Health (ICOH) and Society for Occupational Medicine (SOM), UK and been awarded as a winner for Outstanding Contribution to the Development of OH Globally in 2021 by SOM.

With his series of certified competencies and experiences, he has strong networking linkages with various agencies including the Ministry of Health (MOH),

Department of Occupational Safety and Health (DOSH), SOCSO and industries where he contributes in the establishment of Occupational Health (OH) system, promotion of OH culture at the workplace, the establishment of OH monitoring and inspection system, conducting audits and health risk assessments.

Dr Shawaludin holds the position of Occupational Health Advisor for various industries including Hengyuan Refining Company.

Legislative Changes

NEW REGULATIONS FOR ALL CRYSTALLINE SILICA PROCESSES

From 1st of July 2024, the manufacture, supply and use of engineered stone was Prohibited in WA, in alignment with other Australian jurisdictions.

The Work Health and Safety Regulations 2022 define engineered stone as an artificial product containing at least 1% crystalline silica and created by combining natural stone with other chemical constituents (such as water, resins or pigments) to harden the product. The ban includes benchtops, panels & slabs.

Transitional arrangements will allow the completion of installation until 31/12/24 IF contracts were signed by 31/12/2023. UNCONTROLLED Dry Cutting will remain PROHIBITED during this period.

Additionally, the WHS General Regulations have been amended to introduce a stronger regulatory framework for all industries working with crystalline silica. Materials such as marble, granite, asphalt, cement, concrete, bricks, pavers and tile contain silica and workers in construction, manufacturing, tunneling, demolition, mining, quarrying and stonemasonry can be exposed to silica dust. New requirements which took effect as of the 1st September, 2024 include:

- ✓ A requirement for the controlled processing of all crystalline silica substances (CSS)
- ✓ A requirement to undertake risk assessment for all processing of CSS
- ✓ Additional duties for any processing of a CSS that is assessed as HIGH Risk.

Further information on [Engineered Stone ban](#) and [Silica](#) on the WorkSafe WA Website.

Image credit: iStock.com/Julia Gomina

Extract from ThinkSafe Vol 6, No 2, November 2024

CONSULTATION OPEN – PROPOSAL TO REDUCE WORKPLACE EXPOSURE STANDARD FOR ALUMINIUM (WELDING FUMES)

Safe Work Australia is seeking feedback on a **proposal to reduce the Aluminium (welding fumes) workplace exposure standard (WES) from 5mg/m³ to 1mg/m³**.



The public consultation will close on Friday, 28 February 2025.

SWA have published [a review](#) that recommends a reduction to the WES for Aluminium (welding fumes) from an 8-hour time weighted average of 5mg/m³ to 1mg/m³. This proposed reduction is intended to better protect workers from adverse health effects from exposure to Aluminium welding fumes.

The justification for this recommendation is as follows:

- There is insufficient published information to confidently propose either a health based or risk-based Workplace Exposure Standard for welding fumes (NOC).
- Dose-response data for lung cancer are insufficient to allow lung cancer to be used as the critical health effect.
- Epidemiological data are insufficient to allow other health effects to be used as the basis for a Workplace Exposure Standard. Submissions will inform Safe Work Australia Members' recommendation about the proposed reduction to work health and safety (WHS) ministers.
- Safe Work Australia has recently lowered the Workplace Exposure Standard from 5mg/m³ to 1mg/m³.
- Equivalent Workplace Exposure Standards (mainly) based on inhalable particles in other countries which have a Workplace Exposure Standard for welding fumes (NOC) (or its equivalent) range from 1 mg/m³ to 5 mg/m³. All other things being equal, it seems sensible for the Australian Workplace Exposure Standard to be consistent with equivalent Workplace

Exposure Standards in operation in other countries where possible, but with the aim of erring on the side of providing additional protection of workers.

- Several countries have withdrawn their Workplace Exposure Standard for welding fumes and instead use the measured values for individual welding fumes constituents. This approach is not recommended for Australia because the harmful constituents of welding fumes are not known in their entirety (the International Agency for Research on Cancer (IARC) made this clear in their determination). The IARC designation of welding fumes as a human carcinogen was based on total welding fumes, not on any specific component of welding fumes. Focussing only on the individual constituents runs the risk of not measuring the presence of a relevant constituent or combination of constituents and thus underestimating the relevant exposure of workers.

Until WHS ministers make their decision about whether to reduce the WES, the current WES for Aluminium (welding fumes) still applies.

For more details and updates on the proposal, refer to the SWA [Consultation Hub](#) page or subscribe to their [mailing list](#).

Taken from Safe Work Australia Website 05/12/2024

MINING AMENDMENT BILL 2024 INTRODUCED TO PARLIAMENT

On 27 November the Mining Amendment Bill 2024 (MAB 2024) was introduced into Parliament, following approval earlier this year to draft amendments needed to support security of tenure for Western Australia's mining sector.

The Bill proposes changes to the Mining Act 1978 (Mining Act) to update tenement application requirements, modernise the application process to facilitate online applications, as well as other minor changes to improve the efficiency of resource tenure processes.

Some key amending provisions include:

- Removing contemporaneity requirements for supporting documents (such as mineralisation reports for mining lease applications) to accompany applications.

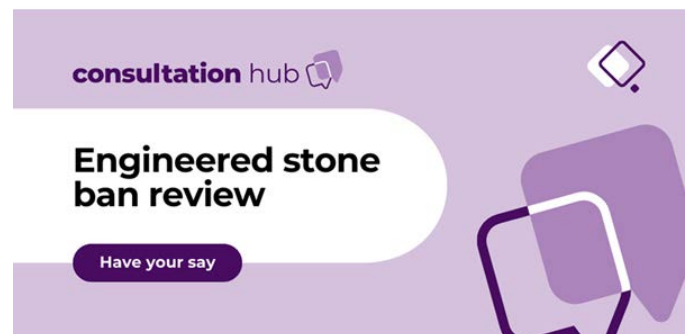
- Clarifying requirements for supporting statements for exploration licences and mining leases.
- Updating the assessment requirements for mineralisation reports.
- Expanding the definition of 'mining tenement document' to facilitate electronic lodgements.
- Creating a power to make regulations that prescribe ways of complying with requirements for a fee or other consideration to accompany an application.
- Strengthening the security of title and the integrity of the register of mining title through an amendment to s 116(2).
- Validating pending applications that may not have complied with prescribed requirements.

The update to application processes and requirements will protect the security of tenure for prospective applications following the High Court decision *Forrest & Forrest v Wilson* [2017] HCA 30.

Extract from DEMIRS Website 17/12/24

REVIEW OF THE ENGINEERED STONE BAN – PUBLIC CONSULTATION NOW OPEN

Safe Work Australia is seeking feedback on the operation of the engineered stone ban which came into effect on 1 July 2024 to help protect workers from exposure to respirable crystalline silica.



As part of the consultation, they would like to hear how the engineered stone ban is working in practice. They are also gathering insights about access to information and resources related to the ban, ideas for future work health and safety (WHS) research related to silica and how the ban could be improved.

Anyone with an interest in the operation of the ban is encouraged to share their thoughts. They are particularly interested to hear from employers and workers who have had direct experience with the ban.



Public consultation is now open until 11.59 pm (AEDT) on Monday 31 March 2025. Please visit [Safe Work Australia's Consultation Hub](#) to have your say. You can respond through the online questionnaire, upload a submission, or both.

The consultation process will inform Safe Work Australia's review of the engineered stone ban that will be provided to WHS ministers for their consideration.

For more information about the engineered stone ban, please visit [Safe Work Australia's engineered stone ban website](#) or contact your [state or territory WHS regulator](#)

Taken from Safe Work Australia website 11/02/25

TRANSITIONAL ARRANGEMENT — HIGH RISK WORK LICENCE - REACH STACKERS (RS)

On 31 March 2025 the requirements for a high risk work licence - reach stacker will change.

From 31 March 2025, reach stacker (RS) operators will be required to hold an RS, C2, C6, C1, or CO class of high risk work licence.

Prior to this date RS operators, who do not have a high risk work licence with one of these classes, will need to have:

- completed the 'TLILIC0011 - licence to operate a reach stacker (greater than 3 tonnes capacity)' VET course
- been assessed as competent by an RS accredited assessor
- applied for an RS class of high risk work licence.

Further information:

- [High risk work licence](#)
- Work Health and Safety (General) Regulations 2022 – [transitional and savings provisions](#)
- Work Health and Safety (Mines) Regulations 2022 – [transitional and savings provisions](#)

Taken from DEMIRS Newsletter 15/01/2025

IN EVENTS

Blue Scope HSE Journey – Felt Leadership



Mr Tony Egbers - - BlueScope Steel WA & SA Manager
Thursday the 28th November 2025



Attendees at the OHS 2024 AGM were treated with a heart felt personal journey of a manager traversing an organisation’s journey of cultural change.

Tony Egbers provided an insightful and thought provoking presentation, which demonstrated leadership and organizational maturity providing a psychologically safe environment, which he described with humility.

Tony described how they are actively reporting near misses and have developed a reporting culture, which enables a growth mindset for improving safety. He stated all incidents are investigated using the 5 why’s with CARS recorded and tracked.

BlueScope’s approach to health and safety management has historically applied DuPont Safety Programs to analyse, benchmark, compare, uncover issues and improve on safety culture. Safety performance appeared to have hit a plateau...we’re not hurting people at an extreme rate, but we’re not moving forward towards continuous improvement.

This led to the idea of safety evolution - it’s not that where we’re coming from is bad, but we need to reflect, grow, and develop to ensure ongoing best practice and let go of what doesn’t serve us anymore.

Blue Scope is now moving towards greater integration of safety. A shift in mindset, an application of Human Centred principles. They wanted to learn faster and better than before by getting honest and constructive feedback from their teams. They wanted to increase trust, show visible felt leadership, share authentic information and build psychological safety.

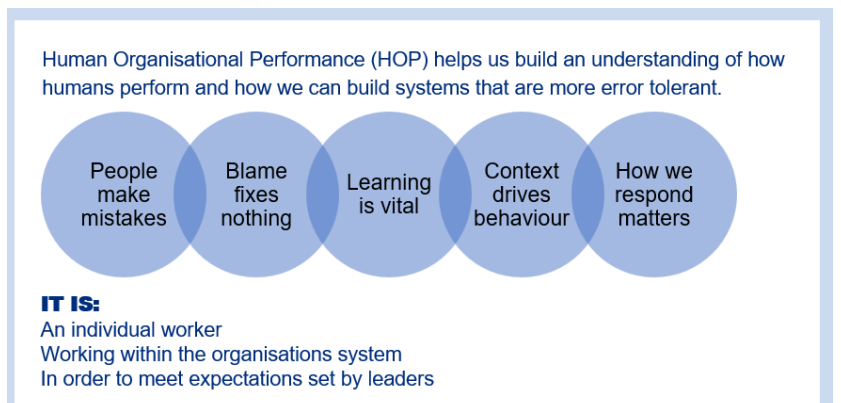


Despite training and using “*just culture*” they recognized that sometimes risk was still being taken at a human level. They addressed this, by engaging and teaching their people about looking after each other, bringing us to the FELT, where leadership is a choice, not a rank-Care, courage, curiosity and consistency. This has had a profound and positive impact.

They have also actively applied the 5 HOP principals where:

In the past Blue Scope focused on Human Behaviour, Human Error and Compliance with rules. Old ways of thinking were:

- People are the problem to control
- We need to find out what people did wrong
- We write or enforce more rules
- We tell everyone to try harder
- We get rid of bad apples



They have now moved to consistent applications of the HOP principles and are now measuring the appreciable difference. The presentation, was well received, with a huge amount of engagement and questions. Please log into the website to access the power point presentation from the evening.

50 Years of Occupational Health Practice

Personal Insights from Guest Speaker Dr Kar Chan Wan

Wednesday 4th December 2024 - 9pm via Google Meet



On the 4th of December we were excited to hear from our very own Dr Wan.

Dr Wan has a breadth of international experience in the field of occupational medicine, as an occupational physician, he is a past president of OHSA, and a life member. Dr Wan provided a collaborative virtual meeting with Malaysian Occupational Health Practitioners Association (MOHPA). It was a well-attended event with Occupational Health Practitioners signing in from Australia, Malaysia, the United States of America and United Kingdom. It was

an excellent opportunity for international collaboration, information sharing, and relationship forming.

Dr Wan talked of his career, and his journey, through Occupational Medicine, and all the advances in knowledge he had witnessed throughout this time. Including managing several emerging threats, from asbestos, silica, infectious diseases, black lung, and covid-19 to name only a few. He discussed his experience as an international tutor and lecturer, his work in dust diseases and ILO, his experience in the medical legal aspects of occupational medicine, and some fascinating insights of his time as an inspector WorkSafe WA.

IN SAFETY

Investing in Safety: What to Expect in Terms of ROI

Typically, the benefits of health and safety systems are framed in terms of cost-avoidance. Organisations are constantly reminded that health and safety failure is expensive. And whilst this is certainly true, there are benefits to health and safety success that go beyond cost-avoidance.

Today, successful organisations view safety as an asset, and health and safety spending as an investment. This is because a safe workplace adds measurable business value, and can drive tangible improvements in performance, profit, and culture.



In October 1987, Paul O'Neill gave his now famous first speech as CEO of Alcoa, stunning shareholders by announcing that the company's primary focus would be on worker safety over profits. Investors were spooked.

However, O'Neill was at the company for 13 years after this announcement, and in that time Alcoa's income increased fivefold. According to data from the NSC, Alcoa's annual earnings also went from \$0.20 per share to \$1.41 in the five years between 1994 and 1999. The company's sales also grew an average of 15 percent per year.

This notion that safety is good for business is not a new concept, but it is one that is gaining increasing traction as more in-depth research is released. One study puts the return on investment of health and safety spending at 2.2 [1]. The researchers said that while occupational safety and health was a statutory obligation for employers that was beneficial to employees, it was also "equally a factor for business success." Specific

microeconomic benefits are outlined in the points below.

EFFECTS OF HEALTH AND SAFETY INITIATIVES

Other studies have this number even higher. In fact, a Comcare paper reveals an average return of \$5.81 for every dollar invested by companies into workplace health programs [2]. It also found the average worksite health program:

- decreased sick leave absenteeism by 25.3 percent
- decreased workers compensation costs by 40.7 percent
- decreased disability management costs by 24.2 percent

Another study analysed the stock market performance of companies recognised for their health and safety and found an average annual return of 6.03 percent – well above the market average of 2.92 percent [3]. The researchers said the evidence was there to support the concept that focusing on the health and safety of a workforce is good business.

Research published in the American Journal of Health Promotion and the European Journal of Public Health have since reinforced this perspective but add additional insights. A 2014 study found that workplace health promotion programs do indeed demonstrate a positive return on investment, though exact returns vary by study design [4]. Importantly, the review also reported that negative ROIs were found among the cohort of the most rigorous studies. This sobering finding should help remind us that, while safety initiatives have a probability of financial returns, merely 'throwing money at the problem' is not a foolproof approach.

Similarly, a 2023 systematic review further highlighted how workplace prevention interventions do result in positive financial returns on average. Yet, again it was found that higher quality studies more often report negative returns than quasi-experimental or non-experimental studies, although negative ROIs were here still in the minority (15%) [5]. One possible lesson to take from this is to be careful of the bias of wishful thinking when analysing the effects of particular safety programs, and that accurate feedback is crucial for decision-making.

The core insight remains powerful: while comprehensive wellness efforts can dramatically improve healthcare costs, productivity, and overall performance, rigorous and unbiased reporting systems are essential to distinguish worthwhile initiatives from wasteful ones.

Sources

1. International Social Security Association, The return on prevention: Calculating the costs and benefits of investments in occupational safety and health in companies, Geneva, 2011
2. Australian Government (Comcare), Benefits to Business: The Evidence for Investing in Worker Health and Wellbeing, 2011
3. Environ Med, The link between workforce health and safety and the health of the bottom line: tracking market performance of companies that nurture a “culture of health”, 2013
4. American Journal of Health Promotion, The relationship between return on investment and quality of studies for workplace health promotion programs, 2014
5. European Journal of Public Health, Return on investment of workplace-based prevention interventions: a systematic review, 2023

Image credit: Knowledge City

Extract from **MYOSH Academy**, Kristina Shields, 10/12/24

Calls to Prioritise Contractor Safety in Mining

New research has highlighted how contracting hiring for cost reduction creates safety risks in mining, prompting calls for stronger regulatory oversight. Michael Quinlan, Emeritus Professor in the School of Management and Governance at UNSW Business School, said there is an urgent need for governments and regulators to provide more effective oversight of contractor safety in the mining industry. In mining jurisdictions like Western Australia and Queensland, Quinlan said there is evidence that contractors are over-represented in mine fatalities.

“This may well help explain why the incidence/frequency of mine fatalities has not improved, at best, in the past decade or more,” Quinlan said.

Quinlan’s comments come off the back of new research which explores how traditional approaches to contractor management, focused on cost reduction and operational flexibility, can create unforeseen risks and potentially catastrophic outcomes. The study analysed decades of quantitative and qualitative research across multiple countries and industries.

Conducted by Quinlan and University of Newcastle School of Health Sciences graduate Heather Jackson, the research examined 120 publications, focusing on 65 key studies that investigated safety outcomes in mining

operations. The research spanned developed and developing economies, with particular focus on Australia, South Africa, the United States, Turkey and various South American mining regions.



The research revealed how contracting practices have transformed traditional work arrangements, creating new challenges for workforce management and safety. The growth of contracting has been associated with other shifts in work practices, including the increasing use of fly-in, fly-out (FIFO) and drive-in-drive-out (DIDO), whereby workers live remotely from the mine rather than a nearby mining town and live in barracks while they are onsite.

These changes extended beyond simple employment arrangements, and the researchers said there has been a growing trend towards the practice of ‘hot-bedding’ — analogous to hot-desking among service workers. This practice, where workers share accommodation on different shifts, created additional fatigue management challenges and potential safety risks.

The impact on working hours is a significant concern, with contract workers working longer hours. One study showed contractors averaging 65.85 hours compared to direct employees at 52.40 hours. The research identified that these extended hours created heightened safety risks. “Being a contractor was a risk factor for injuries associated with long working hours,” the researchers found.

The research revealed that cost reduction is the primary driver for increased contracting, though the economic rationale proved more complex than surface-level savings. The primary drivers for this growth are economic, as contract labour is typically paid less than directly engaged mineworkers. “Contractors can be more easily ‘discharged’ in a downturn, and if self-employed will not have access to workers’ compensation or other regulatory entitlements, are less likely to be unionised or to raise complaints onsite,” the researchers found.

A McKell Institute report also found that contractors were paid up to \$30,000 less per year than direct employees. However, these apparent savings often led to increased costs in other areas. The study found that responsibility for meeting compliance costs was distributed unequally, with the majority borne by contractors and exacerbated by competitive tendering processes. The financial pressures on contractors created cascading effects throughout operations.

“Mining companies identify failure of the contracting company to take responsibility for supervising their employees and ambiguous OHS regulatory responsibilities,” the study said.

Image credit: iStock.com/Martin Barraud

Extract from NSCA Foundation, 20 Nov 2024

Record Fine for Inadequate Plant Maintenance

Worker dies, \$567K fine for Engineering Company.

Following the death of a worker at a Bassendean workshop, an engineering company has been fined \$567,000.

Hofmann Engineering Pty Ltd pleaded guilty under the Occupational Safety and Health Act 1984 to failing to provide and maintain a safe workplace and, by that failure, causing the death of a worker and was fined in the Perth Magistrates Court.

In May 2019, the worker was using a welding manipulator at Hofmann’s fabrication workshop to weld clamp plates to the end of a girth gear segment. To do so, he needed to work underneath the boom of the welding manipulator, which weighed 1350 kg.

The boom fell suddenly when the man was working underneath it, resulting in fatal crush injuries.

The court heard there was no manufacturer’s manual or maintenance logbook kept for the 40-year-old welding manipulator.

The only checks done were visual pre-operation checks limited to checking buttons, ensuring the machine went up and down and that it was not making any unusual noises.

Apart from these pre-start visual checks, there was no other scheduled maintenance or inspections carried out or recorded by a qualified fitter.



The court agreed that the incident was caused by a lack of reasonably practicable safety measures.

WorkSafe WA Commissioner Sally North said the case was a reminder of the crucial importance of regular inspection and maintenance of machinery in workplaces.

“The court found that the machinery involved in this incident had not been adequately maintained and had also been sitting unused in storage for several years, exposing it to foreign materials such as dust,” North said.

“When independent experts inspected the welding manipulator, they confirmed the threads on the nuts involved in holding up the boom were worn to such an extent that they were unable to maintain the load placed on them.

“In addition, grease on the lead screw was grossly contaminated with foreign fine solid material to the point where it was having a negative effect on the screw.

“The tragic outcome of the company’s failure to implement safe work procedures should serve as a warning to all employers with heavy machinery at their workplaces to conduct regular inspections and maintenance in accordance with the manufacturer’s instructions and take action to eliminate or minimise any risks to workers’ safety.”

Image credit: Welding Alloys. image used is for illustrative purposes only.

Taken from Safety Solutions, 29 November 2024

\$350,000 Fine - Young Worker Burns & Non-Reporting

A Hope Valley heavy industrial company has been fined \$350,000 on two charges (and ordered to pay \$5295 in costs) over causing serious injuries to a 16-year-old apprentice and not reporting the injury.

National Steel Workplace Pty Ltd pleaded guilty to failing to provide and maintain a safe work environment and, by that failure, causing serious harm to a worker, and was fined in the Rockingham Magistrates Court yesterday. National Steel also pleaded guilty to failing to notify the Commissioner of that injury.

The company manufactures and supplies structural steel for the residential construction industry, and the Hope Valley premises include a workshop where machine operators, welders, fabricators, yard hands and delivery drivers are employed.

In July 2021, the apprentice was instructed to perform small welding work in a welding bay. He was wearing an undershirt, work shirt and hi-vis hoodie, with protective equipment of a welding helmet, respirator and welding gloves.

He later replaced the hoodie with a hi-vis tradie jacket, and during his next weld he felt heat on his arm. When he removed his helmet, he discovered that his jacket, shirt and undershirt were on fire.

He lay down in a puddle of water on the ground to extinguish the flames, but by that time had suffered serious burns to his abdomen, chest and hand requiring two surgeries with skin grafts, long term pain and an infection, and post-traumatic stress disorder.



The apprentice did not return to work at National Steel, and the company did not notify WorkSafe of the injury as was required under the laws at that time. WorkSafe only became aware of the incident in November 2021 when an inspector paid a proactive visit to the workplace.

WorkSafe Commissioner Sally North said today the case sends a strong message to workplaces in which welding is carried out to ensure workers use all appropriate personal protective equipment and that young and new workers are provided with training and supervision in all workplaces.

“The 16-year-old involved in this incident should have been closely supervised given his young age and minimal experience and should have been provided with fire-retardant clothing and instructed to wear a welding apron,” Ms North said.

“In addition, he did not receive a formal induction that included instruction on workplace safety, nor was he given any safety induction documents.

“He was not issued with company-supplied protective clothing, as his employment began after the annual allocation of long-sleeved fire-retardant cotton work shirts.

“No senior staff member was constantly supervising the apprentice at the time of this incident. His supervisor walked past him a number of times but did not instruct him to wear an apron despite being aware of the risks of hot work such as welding.

“The young man’s clothing had previously caught fire and he was subsequently given a leather welding apron, but no policy was enforced that required workers to always wear the apron or a welding jacket while welding. Not all welders at the workplace wore aprons when welding.

“A job safety analysis had been prepared for welding that specified the protective equipment required, but this was not enforced.

“It’s not enough to simply have safety rules – they need to be implemented.

“WorkSafe’s website contains guidance on both hot work safety and new and young workers, and I encourage employers to take a fresh look at their safe work procedures in line with that guidance and in consultation with workers.”

Image credit: iStock.com/AzmanL used is for illustrative purposes only.

Taken from DEMIRS Website 10/12/24

Protective Clothing for Welders

Welding, grinding and working with hot materials pose significant risks to welders. WorkSafe WA has investigated numerous incidents where welders’ clothing has caught fire during welding, grinding or contact with hot welded plates which resulted in serious burns requiring medical attention.

Wearing appropriate protective clothing when undertaking welding works is essential in safeguarding welding works is essential in safeguarding welders.

Untreated cotton drill clothing including high visibility garments often claim compliance with standards. However, they are not INHERENTLY flame-resistant.

While synthetic materials like nylon and polyester can be difficult to ignite, once ignited, can melt and drip. The melted material can cause serious burns when it drips onto exposed skin.

Undergarments made from loose weave fabrics are highly flammable and should never be exposed during thermal cutting, grinding or welding. Ignited undergarments can set the outer garment ablaze, exacerbating the risk.

Flame resistant cotton drill clothing is highly recommended as protective clothing for welders. While it may cost more, the safety it provides outweighs the investment. Look for clothing labels:

- ISO 11611
- ISO 11612
- ISO 14116
- ASTM F1959
- AS/NZS 4502.2 as they conform with flame resistant standards.

GUIDELINES FOR PROTECTIVE CLOTHING



- ✓ Full Coverage – ensure clothing protects all parts of the body from hot particles or objects.

- ✓ Preferred Fabrics – opt for leather, wool or flame-resistant cotton drill.
- ✓ Avoid cuffs and open pockets – garments should be free of cuffs or open pockets that could trap molten metal and cause local burns or fires
- ✓ Proper Fit, snug wrists, but ensure loose fitting overall – especially in hot weather.
- ✓ Maintenance – regularly launder clothing as per manufacturer guidance and check for holes.

Image credit: iStock.com/Gravenella

Taken from ThinkSafe Vol 6, No 2 November 2024

Service Pit Death brings \$300,000 Fine

A southern Adelaide electrical company has been fined \$300,000 after a worker died when he became trapped in a pit. JD Finlay Electrical was sentenced in the South Australian Employment Court on 20 November.

JD Finlay Electrical was charged for a breach of section 32 of the Work Health and Safety Act 2012 following a SafeWork SA investigation.

The charges related to a failure to take adequate steps to identify the hazard created by the work environment and to provide adequate training and safety documents in the performance of the task required to be undertaken.

The worker was tasked with pulling electrical cables through conduit pipes which terminated within the pit on 1 June 2022. To do so, he laid on the ground and leaned into the pit to pull electrical cables through conduit pipes.

As he attempted to extricate himself from the pit, he was unable to do so. The worker died at the scene of positional asphyxiation.

Work on the day of the incident involved a non-standard pit, access to which was partially obstructed by the presence of an electrical distribution board (EDB) above it.

The particular tasks to be undertaken had not been assessed by a supervisor, nor had any risk assessment for the job been undertaken prior to the workers attending the site.

A trained supervisor was not on site when the incident occurred, and the pit cover had not been removed to assess what lay beneath it.

In his sentencing remarks, Deputy President Judge Crawley said JD Finlay Electrical had shown genuine

contrition and remorse and had addressed deficiencies in its systems since the fatality.

He said the failure to undertake an appropriate risk assessment and the reliance upon a worker without appropriate training to identify and manage the risks for himself was a circumstance common to many cases.

‘Of critical significance to my mind was sending a work crew to undertake a job in a non-standard workplace without prior risk assessment or accompanied by someone trained in risk assessment,’ Judge Crawley said.



Image credit: Caslec Electrical & Data used is for illustrative purposes only.

‘That a worker may lean at least partially into the pit should have been obvious. That a worker may then slip into the pit headfirst was a foreseeable risk. With a pit being 1240mm deep, the potential for serious injury was real.’

Quotes attributable to SafeWork SA Executive Director Glenn Farrell

Tragedies like this serve to emphasise and justify the heavy onus placed on business owners to **ensure work activities are appropriately assessed** for all known and new hazards and the significant penalties to which they are liable if they fail to adequately control those hazards.

There was a clear failure to take adequate steps to identify the hazard created by the work environment in this instance, and to provide alternative means of undertaking the task without a worker needing to enter the pit in this manner.

Image credit: iStock.com/Julia Gomina

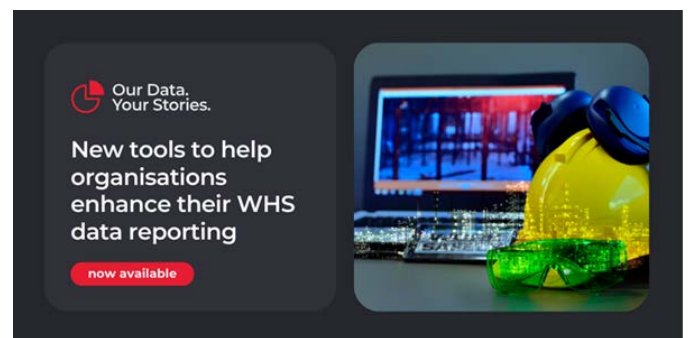
Taken from SafeWork SA Website 02/12/24

New Tools Provide More Accurate WHS Reporting

Safe Work Australia has launched a collection of new reporting tools on our data website, Our Data. Your Stories., to help users more accurately assess, measure and report on WHS performance.

The tools include:

- a new webpage to help interpret data and understand the principles underpinning WHS reporting and performance, and
- a new interactive dashboard using workers’ compensation injury frequency rate data with a range of breakdown options to support benchmarking.



The dashboard uses data from Safe Work Australia’s national workers’ compensation statistics and can be filtered by industry, occupation, injury type and severity.

This approach will deliver better information on how to use data to inform WHS reporting. While the existing Lost Time Injury Frequency Rate (LTIFR) calculator is one way to assess the impact of poor WHS on productivity, the measure has limitations when it is used in isolation to measure WHS performance.

The new dashboard provides a more holistic view and will replace the need for a LTIFR calculator. The LTIFR calculator will be retired from the data website in March 2025.

Explore the new [WHS performance reporting tools](#) on the data website

Taken from Safe Work Australia Website 23/01/2025

Reducing Hazards during Mining Haul Truck Maintenance

A Case Study

Haul trucks and dumpers are among the equipment that is most frequently associated with accidents within the mining industry. According to the paper ‘Occupational Accidents Related to Heavy Machinery: A Systematic

Review', these accidents typically take place during repair and maintenance actions.

One of the main challenges in the mining industry has been ensuring the safety of maintenance personnel during the inspection and measurement of component wear on mining assets such as heavy vehicles. These tasks typically require technicians to physically be within the working envelope of operational vehicles to take manual measurements of moving parts, such as steering linkages during steering checks.



The traditional process for maintenance checks not only poses significant safety risks by placing personnel in the **'line of fire'**, it is also time-consuming,

with little opportunity for productivity gains.

With mining companies seeking a solution that eliminates the need for workers to undertake these manual measurements during this heavy vehicle maintenance, Applied Measurement Australia paired its sensors with the T24 wireless transmitter from wireless measurement expert Mantracourt to create the XTRAN Telemetry Measurement System (XTMS).

"We were approached by some of the largest mining companies in Australia to help them eliminate live work around large vehicles," said James Eccleston, Director of Business Development at Applied Measurement Australia. "The task was to come up with a solution to remove the need for maintenance technicians to be near or under the vehicles while they were operational, enabling them to safely capture necessary measurements from a distance."

Traditionally, securing a haul truck for inspection required a lockout system involving a padlock for each maintenance worker operating on and around the asset, often necessitating the presence of three to five key holders to lock the truck, ensuring it remains immobile for safety.

During these maintenance inspections, workers would use traditional manual gauges, such as dial gauges, to take measurements on various moving parts to determine the amount of component wear. Manual inspections would typically involve three or more maintenance crew. In addition to putting maintenance workers at risk of injury or fatality, the time taken to set

up and capture a single measurement could be around 30 minutes or more.

With numerous measurements to take during each asset inspection, this unnecessary set-up time can add up to many hours. Furthermore, the reading and recording of manual gauge measurements can be subject to human error, potentially leading to unexpected component failure or injury.

The deployment of the wireless telemetry system in mining operations has helped to improve both safety and maintenance, with one company reporting more than a 40% reduction in live work risk across their site, according to Applied Measurement Australia. Since the successful development of the solution, Applied Measurement Australia has seen the deployment of over 100 XTRAN Telemetry Measurement Systems to mining operations mainly in Australia, as well as in North America and Africa. "Through collaboration with Mantracourt and our end customers, these results demonstrate the capability our solution delivers to enhance mining safety and operational efficiency," Eccleston said.

"The ability to perform critical maintenance checks without exposing technicians to potential harm has set a new standard in the industry, showcasing the invaluable role of technologic

Image credit: iStock.com/Martin Barraudi Stock image used is for illustrative purposes only.

Taken from Safety Solutions Feb 2025

Medicinal Cannabis – Information Sheet

WorkSafe has released an information sheet on medicinal cannabis that includes the significant risks it poses in workplaces if not properly managed by PCBUs.

This substance has the potential to impair workers' ability to drive, operate machinery and perform complex tasks safely.

Visit [their website](#) for further information.

Taken from DEMIRS Newsletter 4thFeb 2025



WHS Statutory Responsibilities for Mining Supervisors

MYOSH offers this guide to outline WHS statutory responsibilities for mining supervisors, covering key duties, compliance, and the role of a Mine Safety Management System.

Workplace Health and Safety (WHS) is the cornerstone of safe operations in the mining sector, where the stakes are high, and the potential risks to workers and the environment are significant. Supervisors play a pivotal role in ensuring these safety standards are upheld, acting as the critical link between mine operators and on-site teams.

In Western Australia, recent updates to the WHS legislation, including the Work Health and Safety Act 2020 and WHS (Mines) Regulations 2022, have introduced a comprehensive framework for safety compliance. Supervisors are now entrusted with even greater responsibilities to safeguard their teams and operations.

WHAT ARE WHS STATUTORY RESPONSIBILITIES?

Statutory responsibilities refer to the legal duties assigned to specific roles within the workplace, designed to ensure the health and safety of all workers. In the mining industry, these responsibilities are particularly significant due to the high-risk nature of the work environment. Supervisors, as statutory appointees, are accountable for implementing safety measures, managing hazards, and ensuring compliance with regulatory requirements.



Under the WHS framework, statutory responsibilities in mining are detailed in the WHS (Mines) Regulations 2022. These regulations outline the duties supervisors must undertake to minimise risks and ensure operations meet the required safety standards.

At the core of statutory responsibilities for supervisors are the following key functions:

- **Compliance oversight:** Supervisors act on behalf of mine operators to monitor and enforce adherence to WHS laws and internal safety policies.
- **Hazard identification and risk management:** They are tasked with identifying potential hazards, assessing risks, and implementing control measures to protect workers.
- **Worker supervision and guidance:** Ensuring that workers are appropriately trained and supervised to perform their tasks safely.
- **Incident management:** Overseeing reporting processes for any incidents, near misses, or emergencies and ensuring timely response and resolution.

LEGAL FRAMEWORK GOVERNING SUPERVISORS IN WA

- Work Health and Safety Act 2020 - supervisors are recognised as 'officers' and are therefore obligated to exercise due diligence to ensure the company complies with its health and safety duties. This includes staying informed about WHS matters, understanding the operations and associated hazards, and ensuring appropriate resources and processes are in place to manage risks.
- Work Health and Safety (Mines) Regulations 2022 - Supervisors play a critical role in the MSMS by ensuring that safety protocols are followed and that workers are adequately trained and supervised.
- Mine Safety Management System (MSMS) - pivotal component of the WHS Mines Regulations, serving as the blueprint for safe mining operations. It includes:
 - Health and safety policy
 - Risk management procedures
 - Emergency plans
 - Training and supervision

KEY RESPONSIBILITIES OF MINING SUPERVISORS

1. Workplace inspections and risk management
2. Training, supervision, and worker oversight
3. Incident reporting and emergency preparedness
4. Plant and substances management
5. Promoting worker health and well-being

TRANSITION TO NEW WHS REGULATIONS: WHAT SUPERVISORS NEED TO KNOW

Recognising the need for a smooth transition, the Department of Mines, Industry Regulation and Safety (DMIRS) established transitional provisions for appointing statutory supervisors.

Following the commencement of the WHS Act on 31 March 2022, individuals holding equivalent roles under previous legislation could be appointed as statutory supervisors for a transitional period ending on 30 March 2025.

To provide additional time for compliance, this period has been extended to 30 March 2026. This extension allows current supervisors to meet the new eligibility criteria without disrupting ongoing operations.

ELIGIBILITY CRITERIA POST-TRANSITION

After 30 March 2026, all appointed statutory supervisors must fulfill specific eligibility requirements as outlined in the WHS (Mines) Regulations 2022:

Completion of approved training: Supervisors are required to complete designated units of competency in risk management and legislation. These units ensure that supervisors possess the necessary knowledge to manage safety effectively.

Passing the legislation examination: A mandatory examination assesses the supervisor's understanding of the WHS Act and Mines Regulations, ensuring they can apply legal requirements in practical scenarios.

DOCUMENTATION AND APPOINTMENT PROCESSES

On top of all this, proper documentation must be completed in the appointment of statutory supervisors:

Written acceptance: Supervisors must formally accept their appointments in writing, which can include emails or signed documents. Verbal acknowledgments are insufficient.

Record-keeping: Appointments should be meticulously recorded within the MSMS to ensure transparency and compliance during audits.

Image credit: www.ohsa.com.au/wp-content/uploads/2017/08/mining-supervisor Stock image used is for illustrative purposes only.

Taken from MYOSH Academy 10/12/2024

Engineering Company Fined \$685K over Death of Worker

A Kalgoorlie engineering company has been fined \$685,000 (and ordered to pay \$21,413 in costs) over the

death of a worker.

Monadelphous Engineering Associates Pty Ltd pleaded guilty to failing to provide and maintain a safe work environment and, by that failure, causing the death of the worker, and was fined in the Kalgoorlie Magistrates Court today.

The company provides maintenance and industrial services to heavy industry, including construction, painting and abrasive blasting of metal structures.

In March 2020, the worker was acting as spotter for another worker who was using a telehandler to move a large heavy metal frame structure weighing 648kg.

The frame, which was an unstable load lacking designated lifting points, was lifted by the telehandler forks under its horizontal top bar. The frame was not secured to the forks.

While in the process of being unloaded from the telehandler, the metal frame moved off the forks and fell onto the worker, inflicting fatal crush injuries. Immediately before it fell, the worker had been inside and underneath the frame.

WorkSafe Commissioner Sally North said today the case should serve as a warning to have safe work procedures in place around mobile plant, especially if that plant is supporting a load.

"The court heard that neither of the workers involved in this incident had completed any specific training with respect to exclusion zones," Ms North said.

"Following this incident, Monadelphous issued a safety alert to all its sites instructing that no person was to enter within three metres of any load during movement using a telehandler, but unfortunately this was too late for the young man who lost his life in this incident.

"There's a large amount of guidance on WorkSafe's website on mobile plant safety, and I encourage employers to take a fresh look at their safe work procedures in line with that guidance and in consultation with workers.

"This case should serve as a reminder to workplaces using mobile plant that risk assessments need to be undertaken for each task.

"Select the most suitable equipment to move loads, and always ensure exclusion zones are maintained."

Taken from DEMIRS Media Release, 29/01/2025

IN HEALTH

Lifting Technique Training is NOT Effective MSD Prevention

SafeWork SA is urging businesses to rethink their strategies around lifting and other hazardous manual tasks in a bid to reduce body stressing injuries.

Body stressing injuries are sidelining more than 5000 South Australian workers every year, resulting in average annual compensation costs in excess of \$90 million.

The injury category, which includes muscle stress while lifting or carrying objects and repetitive stress injuries, has accounted for 36 per cent of all ReturnToWorkSA compensation claims since 2018.

Research has found that **lifting technique training is not effective in preventing work-related musculoskeletal disorders.**



There is also no requirement under WHS legislation for businesses to train staff in lifting technique.

A SafeWork SA survey of 150 participants following a hazardous manual tasks webinar in October found that:

- 72 per cent of attendees reported using lifting technique (how to lift) training in their workplace, through means like videos, posters, or stretching exercises.
- 70 per cent believe that lifting technique training is a requirement under the WHS legislation.

The **most effective way** to prevent workplace lifting injuries is to **conduct a risk assessment** of the hazardous manual task and where possible eliminate the risk.

If this is not possible, then other control measures to minimise include:

- substituting heavy items for lighter ones or hand tools with electric tools or machinery to reduce force

- design the work to limit double handling or remove unnecessary work
- redesigning the workplace to limit how far items are carried, or need to adopt awkward postures
- implementing engineering controls such as lifting aids, trolleys, hoists.
- administrative controls such as safe work procedures, task rotation, breaks, and training
- personal protective equipment (PPE).

SafeWork SA is running an educational campaign to raise awareness about hazardous manual tasks and how to prevent body stressing injuries.

The campaign includes a [series of new pages](#) on the SafeWork SA website dedicated to the issue and a series of online workshops.

The resources include general information on musculoskeletal disorders, information specific to duty holders, risk management tips and training advice.

Online workshops will be held monthly until June 2025 to help businesses understand the risks associated with musculoskeletal disorders and how to mitigate them.

Once a business attends one of the workshops, they are eligible for a visit from a SafeWork SA WHS or a ReturnToWork SA advisor who will provide practical guidance on how to reduce body stressing injury risks at your workplace.

[Register for one of the workshops here.](#)

SafeWork SA's [HMT training checklist](#) can assist you in reviewing and meeting the minimum information that should be included as part of your hazardous manual task training.

Industry, business, unions, health and safety professionals and training providers **should not promote, provide or use 'how to lift' training as a sole or primary strategy to meet legislative requirements** or to control HMTs.

Further guidance can be found in the [national position paper on 'how to lift' training](#) and [FAQs](#) by the Heads of Workplace Safety Authorities (HWSA).

Image credit: https://www.safeatworkca.com/siteassets/images/hero-home/adobestock_104153778-dd-lifting-hero.jpg Stock image used is for illustrative purposes only.

Extract from Safe Work SA Website 27/02/2025

Study Links Engineered Stone to Autoimmune Disease

In what could be a preview of an even greater disease burden for those workers in the artificial stone benchtop industry, Monash researchers have conducted a large study finding that those workers exposed to silica dust show a higher incidence of blood markers that are the hallmark of autoimmune diseases such as rheumatoid arthritis (RA) and systemic lupus erythematosus (SLE).

In June this year the manufacture, supply and installation of engineered stone benchtops was banned because of the high incidence of the deadly lung disease silicosis in this sector.



The study, published in the [journal Occupational and Environmental Medicine](#) and led by Professor Karen Walker-Bone, studied a cohort of over 1200 current and former stone benchtop industry workers in Victoria who were offered free screening for silicosis and related disorders between 2019 and 2021. The researchers looked for symptoms or diagnoses of autoimmune disease as well as markers in the blood that could indicate early stages of autoimmune disease.

Among the 1238 workers, 0.9% were confirmed with autoimmune disease; however, almost one-quarter (24.6%) had detectable anti-nuclear antibodies — 24.6% compared to less than 6% in similarly aged male controls.

Of the 24.3% of the cohort diagnosed with silicosis, 6.6% had very high levels of anti-nuclear antibodies. Importantly, the researchers also found associations between autoantibodies and age, smoking, silicosis and intensity of silica dust exposure.

According to Walker-Bone, the proportion of workers with detectable markers for autoimmune disease was

considerably higher than the 5–9% expected in the general population.

“This data suggests that — as well as screening for silicosis in these workers, they should also be screened for autoimmune disease, as these individuals need specialised management and may be entitled to compensation,” Walker-Bone said.

While cases of autoimmune disease have also been reported in engineered stone benchtop industry workers, this is the first study to look at workers before they develop silicosis.

The finding of detectable markers in the blood of autoimmune disease may be an indicator of the worker developing the disease in decades to come, according to Walker-Bone. “Although having detectable autoantibodies in isolation is not diagnostic of an autoimmune disease, their presence in certain rheumatic diseases, such as SLE and RA, has been shown to predate clinical features often by many years,” she said, prompting calls for the monitoring of autoimmune diseases in this group of workers, in addition to screening for silicosis, the study authors said.

“One concern is that a number of those with detectable autoantibodies will go on to manifest clinical disease with prolonged follow-up. However, the government screening clinics for the diagnosis of silicosis are not set up to bear the costs of longer-term follow-up of workers with high exposure who do not yet have detectable silicosis, let alone those who may/may not develop autoimmune disease,” Walker-Bone said.

This is a modified version of a news item published by Monash University. The [original version](#) of the news item can be accessed here.

Image credit: iStock.com/Mogala Stock image used is for illustrative purposes only.

Taken from NSCA Foundation, 1st October 2024

The Danger of Workplace Dust – Not what you Think?

The risk of **chronic kidney disease** is increased by occupational exposure to dust and particles, research suggests. In fact, a study conducted by the University of Gothenburg — which has followed Swedish construction workers since the 1970s — found that the risk was 15% higher among those who were exposed.

Chronic kidney disease is the most common form of kidney disease and involves a slow and progressive deterioration of the kidneys’ ability to cleanse the body. Harmful substances and fluids that would otherwise

have been excreted through urine are instead retained. Research in recent years has found that outdoor air pollution particles from sources such as industry, vehicle exhaust and heating may increase the risk of chronic kidney disease.

The current study shows that this is also likely to be the case for occupational exposure to particles in the construction industry. They found a clear link between workers in construction environments with high dust levels and the risk of developing chronic kidney disease before the age of 65. However, further studies are required to show whether there is a causal link and to identify the biological mechanisms,” said Karl Kilbo Edlund, first author of the study.

HOW WAS THE STUDY CONDUCTED?

Published in the journal Occupational and Environmental Medicine, the study is based on data from more than 280,000 construction workers who participated in health surveys between 1971 and 1993. The results reveal that construction workers exposed to dust and particles were about 15% more likely to be diagnosed with chronic kidney disease and receive medical treatment to replace lost kidney function. However, the increased risk did not persist beyond retirement age.



“Chronic kidney disease is a serious disease that has a major impact on an individual’s quality of life, increasing the risk of secondary diseases and leading to high healthcare costs. Primary prevention is therefore of great importance,” said Leo Stockfelt, Associate Professor of Occupational and Environmental Medicine at Sahlgrenska Academy, University of Gothenburg.

WHAT NEXT?

Improvements in workplace emissions and the use of personal protective equipment have reduced the occupational exposure of construction workers to particulate matter over the period studied, from the 1970s to the 1990s. This is believed to have contributed to a reduction in kidney disease, but according to the researchers, more needs to be done to improve the occupational environment within the construction

industry. The next step for the research team will be to study the link between dust and particle exposure and kidney disease in further groups, to see if the results can be confirmed and to better identify the mechanisms.

Image credit: <https://nmshealth.com/wp-content/uploads/2024/09/Dust-Exposure-in-the-Workplace-Blog.png> Stock image used is for illustrative purposes only.

Extract from Safety Solution Feb 2025

It Pays to Care

THE BUSINESS CASE FOR BETTER INJURY MANAGEMENT

This article ties directly in with an upcoming OHS information seminar where these concepts will be discussed in detail.

Work-related injuries and psychosocial hazards significantly impact businesses, affecting productivity, performance and profitability. However, there’s good news: when it comes to managing work-related injuries and preventing psychosocial risks, it pays to care, writes Dr MARY WYATT, lead occupational physician for It Pays to Care.

“It Pays to Care” is the title and underpinning principle of a new policy paper developed by occupational health experts (the Australasian Faculty of Occupational and Environmental Medicine). The paper demonstrates that organisations can significantly improve return to work (RTW) outcomes, reduce costs, and create healthier work environments by focusing on early constructive support, effective injury management systems, and proactive psychosocial risk prevention.

THE HIDDEN COSTS OF WORK INJURIES AND PSYCHOSOCIAL HAZARDS

Workers compensation insurance premiums are calculated based on claims history and performance. While these premiums typically range from 1–6% of payroll, costs escalate significantly for businesses with poor injury management practices and outcomes. Investing in injury prevention and management strategies can yield significant cost savings. However, the true cost of work-related injuries extends far beyond direct expenses like insurance premiums and health and safety fines. Indirect costs, which are often overlooked, can have a substantial impact on a business’s bottom line. These include lost productivity, costs of hiring, onboarding and training replacement staff, and increased administrative workload for supervisors and other staff in response to the injury. In addition to these costs, businesses must also consider the impact of psychosocial hazards:

- Increased absenteeism and presenteeism due to stress and mental health issues.
- Higher turnover rates resulting from poor workplace culture or job dissatisfaction.
- Reduced team cohesion and collaboration in psychologically unsafe environments.

IMPLEMENTING IT PAYS TO CARE PRINCIPLES

The It Pays to Care policy presents evidence-based strategies to improve injury management, achieve better outcomes for both employees and businesses, and prevent psychosocial hazards. Here are key strategies that organisations can consider:



1. A **well-structured injury reporting system** is crucial for timely and effective management. The system should be:
 - **Easy to use:** Simplified reporting processes ensure that employees can quickly and easily report injuries, reducing delays and confusion.
 - **Personable:** A friendly and approachable reporting system encourages openness and honesty, facilitating early discussions about staying at or re-engaging with work
 - **Timely:** Ensuring the right person is notified promptly about the injury is vital for immediate action and support.
2. **Initiating contact** within one or two days of injury reporting is critical. Prompt engagement is especially important for mental health claims, where communication from the workplace tends to be less frequent. Early and constructive contact allows for timely provision of information and ongoing support and reassurance.
3. **Identifying and addressing psychosocial barriers** early can significantly improve the recovery process. This can be achieved through:
 - **Informal methods:** engaging in conversations, probing, and active listening to understand the worker's concerns and challenges.

- Routine screening: utilising psychosocial risk screening tools to systematically identify potential barriers that could hinder recovery.
4. **Involving supervisors** in the injury management process ensures that the injured worker receives appropriate support and guidance. Supervisors can facilitate the provision of meaningful duties, helping the worker stay engaged and feel valued during their recovery.
 5. A **fair and transparent claims process** is essential for maintaining trust and morale. Ensuring that all parties perceive the process as fair reduces stress and fosters a positive outlook among injured workers.
 6. **Collaboration with various stakeholders**, including healthcare providers, unions and coworkers, fosters a holistic approach, ensuring that all aspects of the worker's recovery are addressed, from medical treatment to workplace adjustments and emotional support.
 7. **Integrate psychosocial risk prevention** into your injury management approach:
 - Conduct regular psychosocial risk assessments to identify potential hazards during RTW.
 - Implement controls to mitigate identified risks, such as workload management and clear communication channels.
 - Provide mental health and wellbeing support services to all employees.
 8. **Foster a positive workplace culture** that supports both injury prevention and effective RTW:
 - Promote open communication about health and safety concerns.
 - Encourage peer support and teamwork.
 - Recognise and reward behaviours that contribute to a safe and healthy work environment.

Investing in effective injury management practices and psychosocial hazard prevention can yield significant benefits for businesses:

- **Increased productivity:** Minimising disruptions caused by work-related injuries helps maintain optimal productivity levels.
- **Lower costs:** Reducing both direct and indirect costs associated with injuries improves a business's bottom line.
- **Enhanced employee engagement:** Demonstrating a commitment to employee wellbeing can boost morale, loyalty and overall job satisfaction.

- **Improved reputation:** Effective injury management practices contribute to a positive brand image and corporate social responsibility.
- **Reduced mental health-related absences:** Addressing psychosocial hazards can lower the incidence of stress-related leave and improve overall workplace mental health.
- **Increased resilience:** A psychologically safe workplace helps employees cope better with challenges and adapt to change.
- **Improved talent attraction and retention:** A reputation for prioritising employee wellbeing can make your business an employer of choice.

Image credit: <https://www.eml.com.au/media/3433/web-infographic-managing-work-related-injuries.png> Stock image used is for illustrative purposes only.

Taken from *Safety Solution Feb 2025*

Why Meal Timing Matters for Shift Workers

Overnight eating may be putting the health of shift workers at risk, a new study has found. Research by the University of South Australia (UniSA), the University of Adelaide and SAHMRI, published in *Diabetologia*, found that overnight eating may be putting night shift workers at higher risk of chronic health conditions.



The NHMRC-funded study involved a six-day trial with 55 adults in the healthy BMI range, who did not usually work night shifts. Participants stayed at UniSA's Behaviour-Brain-Body Sleep Research Centre and were divided into three groups: those who fasted at night, those who had snacks and those who ate full meals.

All participants stayed awake for four nights and slept during the day, with a recovery day on day five to re-establish normal sleeping and eating cycles.

Blood glucose testing was conducted on day six. What did the results show? Professor Leonie Heilbronn, from SAHMRI and the University of Adelaide, said results showed participants who ate meals or snacks during the night shift had significantly worse glucose tolerance compared to those who fasted.

"We found that blood glucose skyrocketed for those who ate full meals at night and those who snacked, while the people who fasted at night showed an increase in insulin secretion which kept blood sugar levels balanced," Heilbronn said.

"We know shift workers are more likely to have diabetes, they're more likely to have heart disease and they're more likely to be overweight. Our research suggests that meal timing could be a major contributor to those issues." Insulin sensitivity was disrupted among all participants, regardless of their eating habits, adding to the body of evidence that night shifts cause circadian misalignment and impair glucose metabolism.

"When you eat a meal, your body secretes insulin, and that insulin helps your muscles and other tissues to take up glucose," Heilbronn said. "If you become resistant to insulin, then you can't take up that glucose as effectively into your muscles — and if it continues, that potentially puts you at risk of diabetes."

Lead investigator Professor Siobhan Banks, from UniSA, said not eating large meals while working night shift and instead eating primarily during the day could be a straightforward intervention to manage health outcomes for many workers.

"This could be easier for people to follow than other more complex diets," Banks said. The researchers said future trials will investigate whether eating only protein snacks on night shift is a potential solution to satiating hunger without predisposing workers to negative health consequences.

Image credit: <https://i.ytimg.com/vi/vZ4xvN1M98M/maxresdefault.jpg>. Stock image used is for illustrative purposes only.

Taken from *Safety Solutions Feb 2025*

Is it Time to say Goodbye to the BMI?

Despite widespread criticism, the BMI continues to be the go-to for measuring some health risks. Now the "body roundness index" is gaining traction as a viable alternative. What's stopping it being used?

While the BMI categorises you based on just your weight and height, the body roundness index factors in your waist circumference, which can be a better indicator of disease risk.

But health professionals still have their [hesitations about the formula](#), so don't expect to see it in your GP's office just yet. [See Full report](#).

Extract from *ABC Health 18th Oct 2024*

IN PSYCHOSOCIAL HEALTH

77% of Young LGBTQ People Report Workplace Sexual Harassment

New research released by Australia's National Research Organisation for Women's Safety (ANROWS) has found that sexual harassment faced by LGBTQ young people in the workplace is widespread and targeted. The national study, undertaken with over 1000 young people aged 14 to 30 years shows that 77% of LGBTQ young people have faced workplace sexual harassment, including inappropriate comments, intrusive questions and jokes about their identities. These incidents are often linked to their gender, age and sexual orientation, with perpetrators exploiting harmful stereotypes and displaying anti-LGBTQ prejudice. The harassment is part of a broader pattern of violence fuelled by homophobia, biphobia and transphobia.



30% of respondents to the study reported that perpetrators threatened them with sexual violence as a means of "fixing" their gender or sexual orientation, a common experience for young women and those presumed female at birth. Most perpetrators were men who were older than the people they harassed and typically acted alone. The study also found that 46% of perpetrators were coworkers, while 31% were clients or customers of the workplace.

Dr Tessa Boyd-Caine, ANROWS CEO, said the research findings are a wake-up call to overhaul workplace culture and policies immediately. "Every inappropriate joke, every intrusive question, every exploitative act pushes LGBTQ young people further from feeling and being safe at work. This must stop. A workplace free from sexual

harassment is a responsibility we owe every LGBTQ young person," Boyd-Caine said.

Distinguished Professor Kerry Robinson, lead researcher from Western Sydney University, said sexual harassment is not an isolated incident for LGBTQ young people — it is part of a larger pattern of harm rooted in homophobia, biphobia and transphobia. "This research shows how deeply workplace harassment impacts LGBTQ young people— it's not just about inappropriate behaviour, it's about a culture that devalues their identity. The majority of respondents chose not to formally report incidents, citing distrust in workplace systems, and instead often left their jobs to escape harassment," Robinson said.

The research revealed that LGBTQ young people often reported receiving minimal or no training on workplace sexual harassment; those who had received workplace sexual harassment training said it was an unhelpful, tick-the-box exercise. The report urges workplaces to implement comprehensive, inclusive training and create policies that foster respectful and safe environments.

Image credit: iStock.com/domoyega

Taken from NSCA Foundation 06/12/24

Poor Mental Health Forces Young People Out of Work

Mental health concerns are driving increasingly younger people permanently out of the workforce, new research suggests.

The Australia's Mental Health Check Up report by KPMG — commissioned by the Council of Australian Life Insurers (CALI) — highlights an unprecedented 732% increase in Total and Permanent Disability (TPD) claims for mental health for 30- to 40-year-olds over the past decade. It is the biggest spike across all age groups.

"The unprecedented number of people leaving the workforce permanently in the prime of their working life has huge implications for them personally, for their loved ones, for our national economy and for our already stretched government support systems," said CALI CEO Christine Cupitt.

"These are very concerning generational trends that show the frequency and severity of mental ill-health is rising exponentially in our community. No one wants this to be their story."

TRACKING TRENDS THROUGH DATA

The data shows Australians are leaving the workforce for good because of mental ill-health at a younger age than ever before. The average age of people who claim is now 46 years old, while a decade ago, the average was around 49 years of age.

By comparison, the average age for other physical causes of permanent disability claim has remained stable at 49 years of age over the same timeframe.

The research also shows that men are far more likely to be classed as permanently unable to work because of mental ill-health, with an almost 60% higher claims rate compared to women.



Almost 80% of the overall increase in the number of permanent disability claims in Australia over the past decade is due to the exponential increase in mental health claims. They have gone up by almost 10% every year while the rate for other physical causes of claim has only increased by 0.5% annually.

“The significant rise in mental health conditions over the past decade is a real concern for the community and this is reflected in the life insurance data shown in our report,” said Briallen Cummings, KPMG Partner and report author.

“We see not only an increase in the overall proportion of people experiencing mental health conditions, but also an increase in the severity of those conditions.”

FAR-REACHING CONSEQUENCES

Australia’s life insurers fear that this unprecedented rise in workforce departures could have a flow-on effect on the affordability of life insurance and the ability of insurers to provide meaningful cover for what is a rapidly growing number of people who are severely incapacitated by mental ill-health.

“This is far bigger than us. While governments are already thinking seriously about Australians’ mental

health, we now have further evidence that our community needs more, including a stronger and earlier safety net to keep people from falling through the cracks,” Cupitt said.

“This can’t just be left to private industry to manage once people are at the end of the road. No one wants to find themselves severely unwell with no other option than to make the life-changing decision to leave the workforce permanently.”

Image credit: iStock.com/skynesher. Stock image used is for illustrative purposes only.

Taken from Safety Solutions 06/12/24 2024

Better Management of PTSD for Frontline Workers

Updated guidelines for the management of PTSD among emergency service workers have been developed by researchers.

Emergency service workers are twice as likely to experience mental health problems when compared with the general population — in large part due to the high risk of trauma exposure at work. In addition, an estimated one in 10 of Australia’s 370,000+ emergency workers and volunteers will develop PTSD related to critical incidents.

The guidelines launched by the Black Dog Institute and UNSW Sydney have been created with a specific focus on the emergency services community in Victoria, using real-world evidence to understand and address the unique challenges faced by this group.



Over recent years, Victoria has experienced devastating bushfires and floods, exposing frontline workers to heightened levels of stress and increased risk of trauma exposure at work. As the likelihood of these events increase due to climate change, the mental health of emergency responders is under growing pressure.

“We want to make sure that any emergency service workers or volunteers in Victoria that come forward for treatment of PTSD know that they’re getting the best



quality treatment, and the treatment that is most likely to work,” said lead co-author Professor Sam Harvey, Executive Director and Chief Scientist of Black Dog Institute.

“We now have a range of different treatment options that are effective for PTSD in emergency service workers, including talking therapies and a range of pharmaceutical treatments. If someone doesn’t get better with initial treatment, there are a range of other evidence-based treatments that should be tried.”

A report now consolidates the best available research evidence to provide clinicians with clear guidelines on how to diagnose and treat emergency workers with PTSD. This includes clinical data from Black Dog Institute and UNSW’s National Emergency Worker Support Service (NEWSS). Since its launch in 2020, NEWSS has reached more than 205,000 emergency service workers and achieved a world-leading PTSD recovery rate of 70–80%, compared to a global average of around 50–60%.

“Treating an emergency service worker with PTSD is fundamentally different to treating PTSD in the general population,” said lead coauthor Professor Richard Bryant, Director of the Trauma Stress Clinic at UNSW. “Australia is now leading the world in the way we care for and treat emergency service workers with PTSD. These guidelines aim to share what we have learnt through more than half a decade of working with this population, to lift quality of care across Australia and internationally.”

Image credit: <https://www.mqmentalhealth.org/wp-content/uploads/ptsd-emergency-workers.jpg>. Stock image used is for illustrative purposes only.

Taken from Safety Solutions Feb 2025

OHSA FUTURE EVENTS & OTHER EVENTS

Welding Fumes – What’s the Deal?

Experts from SafeWork SA and Weld Australia
Thursday the 13th March 2025 – 0730 – 0830
(Perth Time)

This FREE webinar presented by SafeWorkSA will discuss the new Welding Fume Workplace Exposure Standard, and what it means for businesses. Experts from SafeWork SA and Weld Australia will explore the different ways businesses can manage exposure to fumes.

[Register Here](#)

Menopause – The Hidden WHS Issue Impacting YOUR People

Grace Molloy

Tba – Stay tuned. We are looking at April or May

OHSA Inc. is proud to announce that we have secured Grace Molloy CEO of Menopause Friendly Australia to present to members. Date to be advised.

A recent Senate inquiry recommended employers create menopause-friendly environments to support women experiencing menopause and perimenopause PLUS an ISO standard for menopause and menstruation is now in development.

Australian workplaces need to change perceptions around menopause.

Why are we talking about menopause now?

- 18% of the Australian Workforce are menopause aged women
- 73% report increased stress and anxiety during menopause
- 70% of Australian women feel uncomfortable discussing menopause at work
- 1 in 4 intend to leave work due to unaddressed menopause symptoms

- 83% say menopause has had a negative impact on their work

It Pays to Care

Presenter: Dr Amy Bright & Regulator

Date TBA – Stay Tuned

Pneumoconiosis Diagnosis & Assessment for Permanent Impairment – WA Requirements

Presenter: Dr K.C. Wan

Date TBA – Stay Tuned

Use of AI Applications in OSH

Presenter: tba

Date TBA – Stay Tuned

Site Visit – Underground Simulator

Presenter: Mine Safety and Training CEO – Peter Nicholls

Date TBA – Stay Tuned

Peter has kindly opened his doors to up to 20 members to experience what it is like to work underground in the MST Underground simulator. Stay tuned for when this site visit is to be scheduled



OHSA Application Form



Occupational Health Society of Australia Inc.

APPLICATION FOR MEMBERSHIP

MEMBER INFORMATION

Title (Dr, Ms, Mrs, Mr, etc.)	
First name	
Surname	

CONTACT DETAILS

Postal Address			
Suburb		Postcode	
Phone			
E-Mail			

Please indicate your preferred method to be contacted: Postal address Phone E-mail

Special Interests <i>(for Society Directory)</i>	
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EMPLOYMENT INFORMATION *(Only complete if you want Company information to be recorded against your name in the Society Directory and in Society Communications)*

Company / Self Employed	
Work Phone	
Work E-Mail	

APPLICATION FOR *(indicate membership type / fee option):*

- Full Membership (includes *Monitor* newsletter) \$50 - 1 year *or* \$100 - 3 years
- Corporate Membership (includes *Monitor* newsletter) \$100 - 1 year *or* \$200 - 3 years
- Student Membership (includes *Monitor* newsletter) \$20 - 1 year *or* \$ 40 - 3 years

Tertiary Institution _____ Student Number _____

An invoice for the membership type fee will be issued once the Committee has accepted this application.



The OHSA Inc. Financial Year runs from 1st November – 31st October.

Fees payable during this period will apply for that financial year only.

AGREEMENT

I certify that the information provided in this application is correct and I agree to adhere to the Constitution and Code of Ethics of the Society. I also give consent to the Society to collect, use and disclose my personal information in accordance with the National Privacy Principles in matters relating to the Society.

Signature _____ Date _____

CONSENT

I hereby consent to have my details displayed in the Society's directory.

Signature _____ Date _____

ABN: 83 170 105830

Please submit this completed Form to The Secretary OHSA (Inc) E-mail: ohswa@outlook.com.au

PO Box 6107 East Perth WA 6882 | Website: www.ohsociety.com.au

The OHSA (Inc) is a non-profit representative body providing expert advice to Govt at all levels and support to OHS professionals.

Doc Ref: OHSA-DOC-FRM-01-	Doc Name: Application for Membership	Date Reviewed: 15/08/2024	Revision/Version: 2.C
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