

12 August 2022

Director, Occupational Diseases and Hygiene Policy
Safe Work Australia
Via email: occhygiene@swa.gov.au

Re: Consultation Regulation Impact Statement - Managing the risks of respirable crystalline silica

The Australian Institute of Health and Safety is the peak body for generalist WHS professionals in Australia and is the largest WHS professional body.

Our position regarding the Regulation Impact Statement aligns with the submission provided by the Australian Institute of Occupational Hygienists. Our AIHS College Chair, and ex AIOH President, has been part of the development of the AIOH submission in his capacity as a member of the AIOH External Affairs Committee. As such, we endorse the AIOH submission and add the following comments:

In a recent media release (12 July 2022), the AIHS has stated that both the Curtin University and SWA reports may underestimate the benefit of regulating silica exposure, since silica-related autoimmune disease (e.g., scleroderma), kidney disease and other non-respiratory effects are not considered. Prof Lin Fritschi (Curtin University) has acknowledged this. In the same release, the AIHS recommended a nationally consistent regulatory approach, including exposure assessment, across industry sectors. However, the experience of individual jurisdictions with regard to silica-related disease has been different, and we understand that targeted actions taken by regulators will likely be different. In any case, the AIHS can work with individual regulators to promote and/or rigorously evaluate those targeted interventions.

In a practical sense, there are many non-regulatory actions that the AIHS supports, now and will into the future. These include interdisciplinary research. Even at the fundamental level, the pathogenesis of silica-related disease is far from settled. Australia has recently published significant research findings (e.g., University of Adelaide) and there is a continuing pipeline of evidence that has been supported by iCARE and NHMRC. This may ultimately provide the evidence to support a ban on high silica engineered stone since the combined effect of silica, pigment metals and resin in lung tissue may plausibly explain the accelerated silicosis only seen in engineered stone workers.

At the coalface, AIHS members are helping small businesses comply with engineered stone licensing documentation requirements in Victoria and the Code of Practice in Queensland.

Finally, the AIHS is the custodian of the OHS Body of Knowledge, and supports the Australian OHS Education Accreditation Board. Both of these entities relate to the highest level of general WHS education and training in Australia. Although there is content on dust disease prevention, much more can be done in partnership with regulators.

In conclusion, the AIHS is a committed partner in efforts to prevent silica-related disease at all levels and in all industries.



Naomi Kemp
Chair