

NSW Case Studies



February 2020

Dr David Meredith
Head of Health Services
CS Health

Agenda



- 1 NSW framework
- 2 Coal Services
- 3 NSW statistics
- 4 Case study
- 5 Coal Services Health & Safety Trust Project

NSW framework



State and Commonwealth legislation established the Joint Coal Board in 1947. Prevalence of black lung disease at that time was 16%.

“The Joint Coal Board was established in 1947 to assist with the restructure and modernisation of the NSW coal industry, the development of coal resources and supply, and the improvement of the welfare of coal miners.”

“Working conditions in the pits were terrible.”

The Hon. John Della Bosca

NSW framework: Coal Services



- Created under the *Coal Industry Act 2001* (NSW)
- 2 shareholders:
CFMEU and NSW Minerals Council
- Reports to the Minister for Regional NSW,
Industry and Trade
- Power to make orders for the coal industry

Businesses include:

- CS Health
- Coal Mines Insurance
- Mines Rescue
- Coal Mines Technical Services inc. Occupational Hygiene



Our purpose: 'to protect'

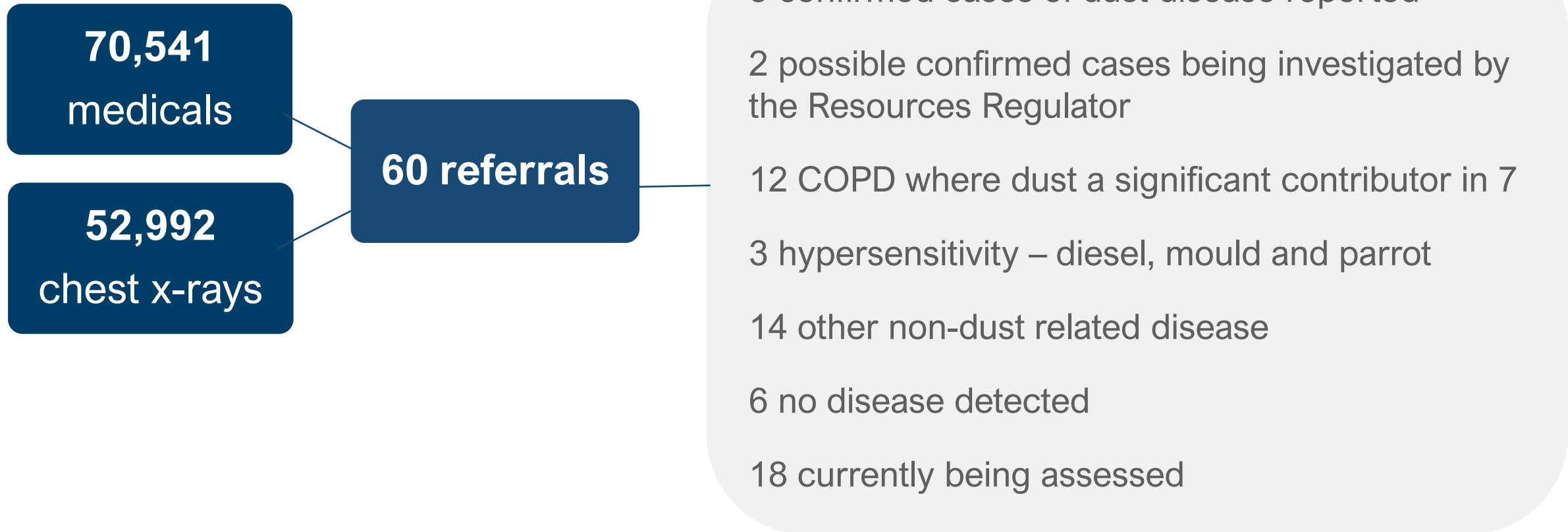
NSW framework

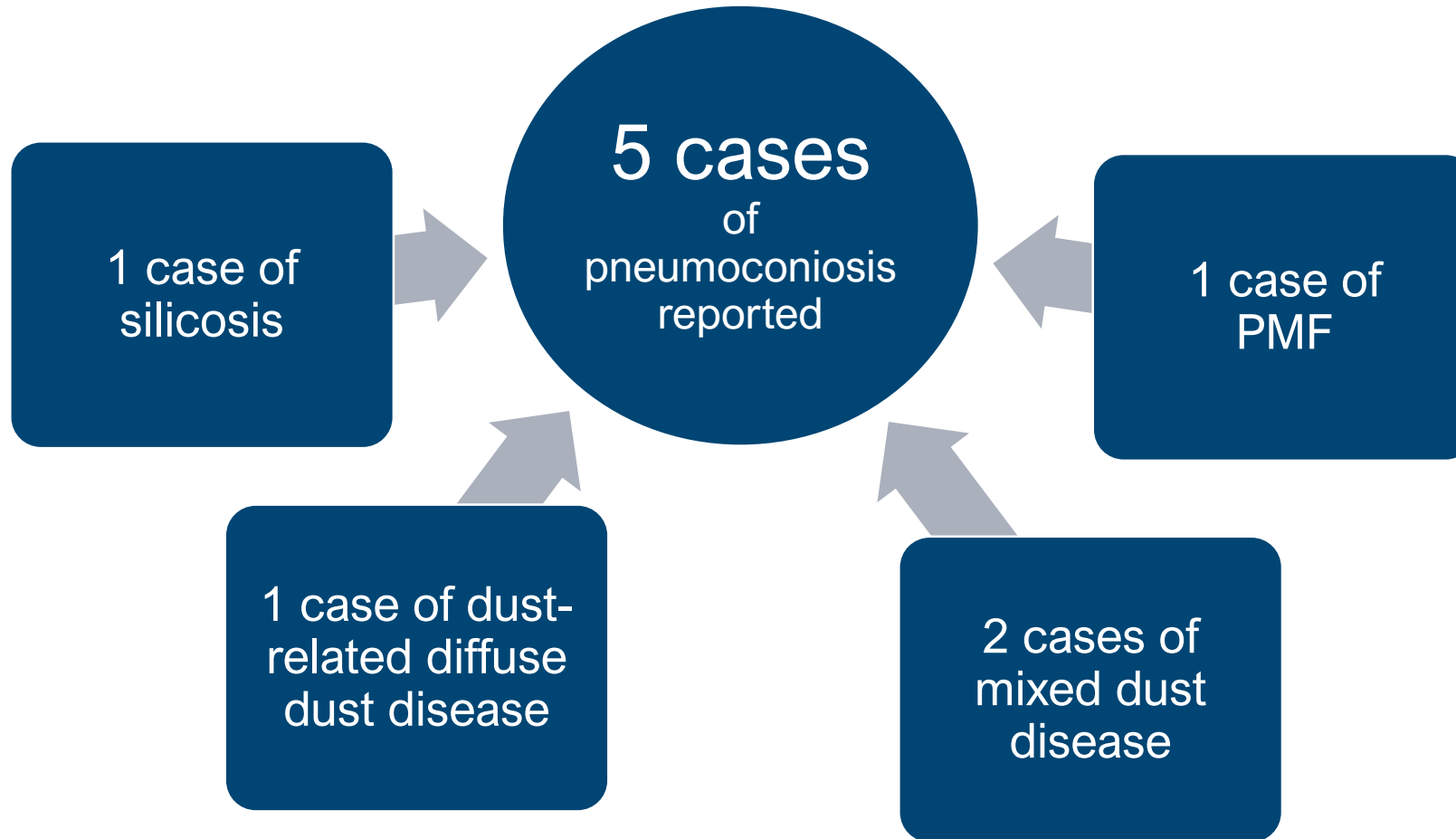
NSW Coal Mine Workers

- Pre-placement medical
- Periodic medical every 3 years
- Chest x-ray every 3 years
- Exit medical
- Retired miner medical



Order 43 medicals are a requirement under the *Coal Industry Act 2001 (NSW)*





2 possible cases being assessed by the NSW Resources Regulator

Case study

- Underground miner for 25 years
- Mine closed
- No longer working underground or exposed to dust
- Presented 8 years after last exposure
- Dust monitoring records
- Standing Dust Committee



Case study

- Centralised records
- Identified 477 miners who may have worked at that mine
- Checked each file
- CFMEU
- Retired Mineworkers Association
- All contacted offered assessment
- Some located in Queensland



NSW statistics

Recent case: mixed dust pneumoconiosis

- 41 years old
- Worked underground 2006-2019, mainly development roles
- 18 months construction/tunnelling
- 11 years motor mechanic, non-mining
- Reported regularly wearing dust masks (not fit tested until 2012 or 2013); fit-tested masks often unavailable
- Attended periodic monitoring
- Developed symptoms and attended GP



NSW statistics

Recent case: mixed dust pneumoconiosis

Issues

- Exposure time and controls
- Individual characteristics
- Screening process and variable presentations



Coal Services Health and Safety Trust Project



Respirable coal and silica in open cut miners

Overall exposures were very low

Usable samples

1,105
respirable dust
samples

Average exposure
0.15mg/m³

1,035
respirable crystalline
silica samples

Average exposure
0.01mg/m³

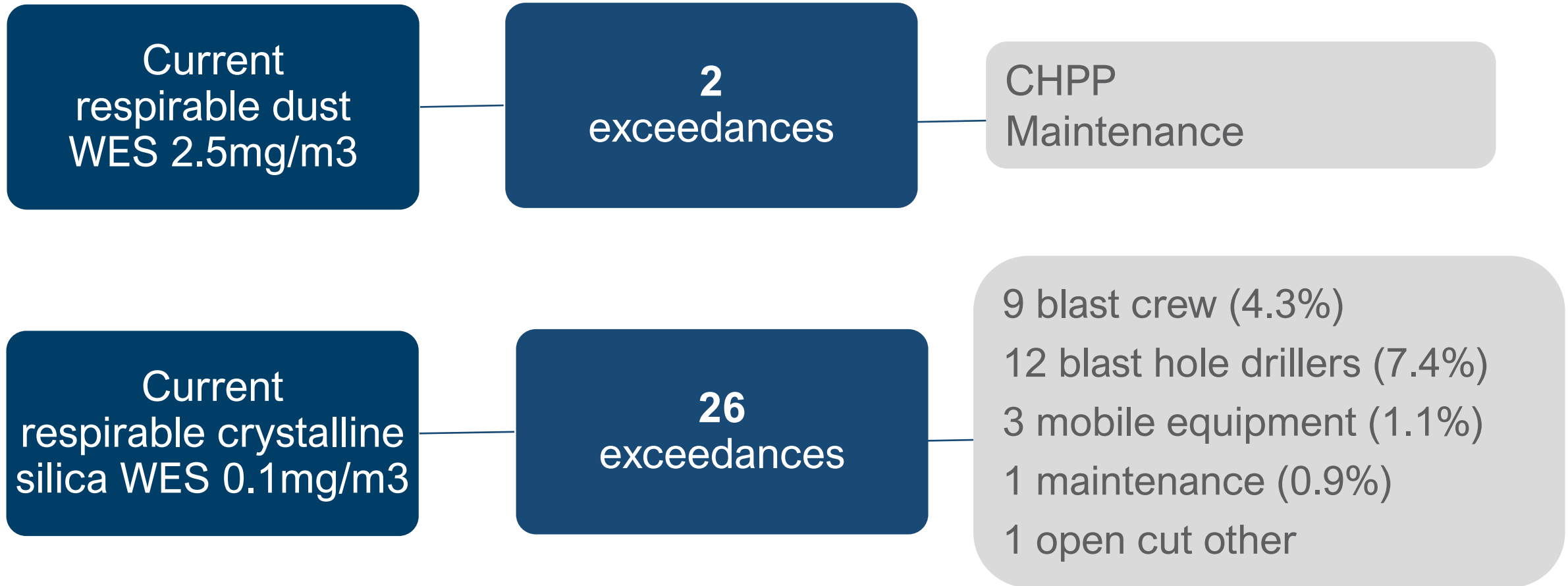
Miners in all NSW
open cut coal mines
sampled over 2 years



Coal Services Health and Safety Trust Project



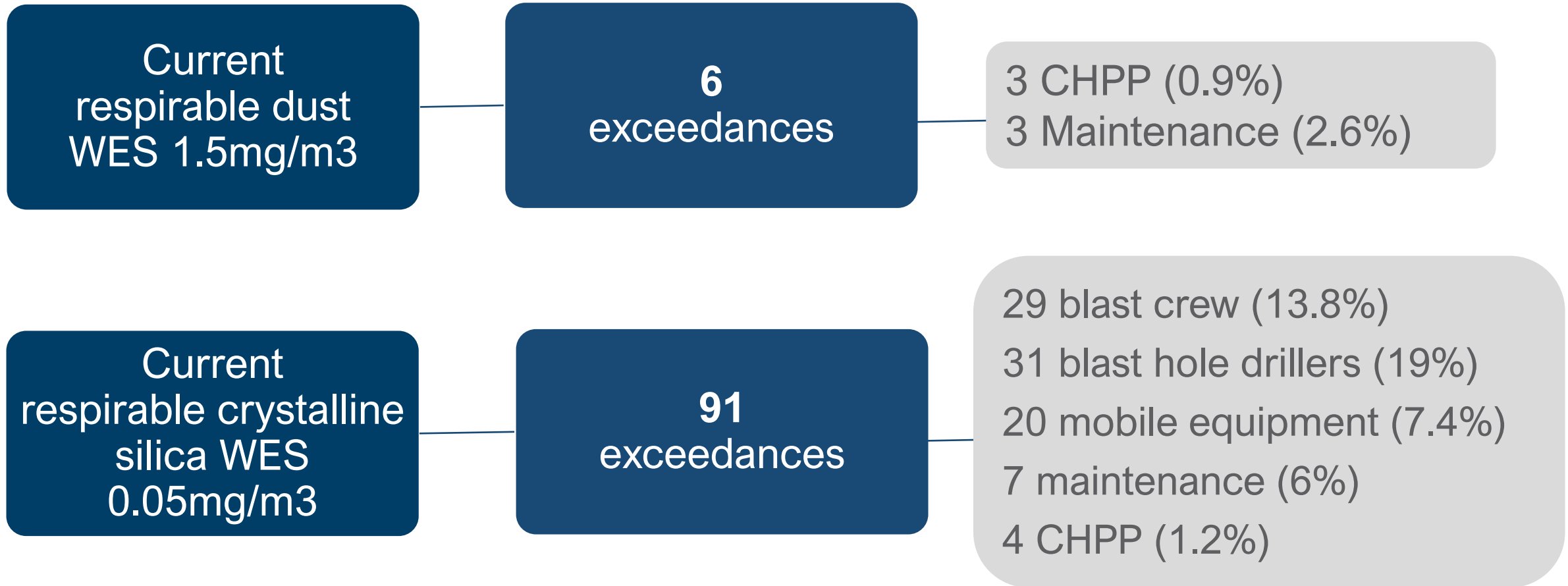
Respirable coal and silica in open cut miners



Coal Services Health and Safety Trust Project



New exposure standards



Coal Services Health and Safety Trust Project



- Poor levels of RPE use even when exceeding exposure limits
- Approximately a third reported to have facial hair



Coal Services Health and Safety Trust Project



Mostly good news with exposure levels and identified disease

Need to work harder with our open cut workers to identify and manage pockets of risk



Coal Services

