



29 February 2016

Mr Stephen Palethorpe
Committee Secretary
Senate Select Committee on Health
PO Box 6100
Parliament House
Canberra ACT 2600

via email: health.sen@aph.gov.au

Dear Sir

I write in respect of the Senate Select Committee into Health's current investigation concerning 'the re-emergence of the pneumoconiosis disease', within the coal industry in Queensland.

Coal Services Pty Limited (Coal Services) is an independent, private organisation that conducts a multi-faceted programme to manage and control the risks to health of coal industry workers posed by airborne dust. The programme is executed in collaboration with the New South Wales Government and industry stakeholders, and has been successful in the mitigation of 'black lung' in the NSW coal fields.

Coal Services would like to provide the following submission in order to assist the Select Committee in its deliberations.

I note that I will make myself available to the Select Committee should you require me to appear as a witness or require any further information about the model in New South Wales.

Should you have any queries please do not hesitate to contact me on 02 8270 3248 or lucy.flemming@coalservices.com.au.

Yours sincerely

Lucy Flemming
Managing Director/CEO

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Brief history of Coal Services

On 1 January 2002 the *Coal Industry Act 2001* was enacted, creating Coal Services and its subsidiary entities to undertake the functions formerly performed by the Joint Coal Board and the NSW Mines Rescue Board.

The new organisational arrangements were necessary following a decision of the Commonwealth Government to repeal the Commonwealth's *Coal Industry Act 1946* and withdraw from its involvement with the Joint Coal Board. In recognition of the importance of the functions that had been carried out by the Joint Coal Board and the significant improvements that it had helped deliver to the NSW coal industry, the NSW Government decided to create an independent, industry owned organisation that provided essential health, safety and other services specific to that industry.

Coal Services is owned jointly by the NSW Minerals Council and the CFMEU and the assets, rights and liabilities of the former Joint Coal Board and Mines Rescue Board were transferred to Coal Services in the new organisational structure.

Coal Services is committed to providing proactive and responsive services to the NSW coal mining industry. It is dedicated to working in partnership with customers and stakeholders to provide a suite of health, safety, environment and workers compensation insurance solutions. These critical services support NSW coal mine workers, employers and communities and demonstrate an ongoing commitment to maintaining a safe workplace and a healthy workforce.

Coal Services has statutory functions, as directed by the NSW *Coal Industry Act 2001*. These functions include, but are not limited to, the provision of workers compensation, occupational health and rehabilitation services, the collection of statistics and the provision of mines rescue emergency services and training to the NSW coal industry. A full listing of these obligations is included below:

1. providing occupational health and rehabilitation services for workers engaged in the coal industry, including providing preventative medical services, monitoring workers' health and investigating related health matters,
2. collecting, collating and disseminating accident and other statistics relating to the health and safety of workers engaged in the coal industry,
3. collecting, collating and disseminating other statistics related to the coal industry,
4. referring matters relating to the safety of workers engaged in the coal industry, as it thinks fit, to the regulator within the meaning of the *Work Health and Safety (Mines) Act 2013*,
5. reporting to the Minister as it thinks fit, or when requested by the Minister, on matters related to the health or welfare of workers engaged in the coal industry, or on any other matter arising out of its functions,
6. publishing reports and information of public interest concerning or arising out of its functions,

7. promoting the welfare of workers and former workers in the coal industry in the State, their dependants and communities in coal mining areas,
8. monitoring, promoting and specifying adequate training standards relating to health and safety for workers engaged in the coal industry,
9. approving training schemes required for a safety management system under the *Work Health and Safety (Mines) Act 2013*,
10. monitoring dust in coal mines,
11. providing mines rescue and other services in accordance with Division 3 and Part 4 of the *Coal Industry Act 2001*,
12. establishing or administering (or establishing and administering), or providing administrative services in respect of superannuation schemes for the benefit of either or both of the following:
 1. mine workers (within the meaning of the *Coal and Oil Shale Mine Workers (Superannuation) Act 1941*), former mine workers and their dependants, and
 2. employees of the approved company, former employees and their dependants, and
13. establishing or administering (or establishing and administering) or providing, workers compensation insurance schemes in relation to workers engaged in the coal industry.

The NSW Experience

A Collaborative Model

The New South Wales system in relation to dust mitigation and health surveillance is based on a collaborative model which includes all key stakeholders in the industry and is underpinned by strong legislation, regulation and compliance.

The key stakeholders in this model are:

- The NSW Department of Industry and their Inspectorate,
- The CFMEU Industry and Site Safety and Health Representatives,
- Coal Services,
- Employers and operators, and
- Workers

The model allows all stakeholders to work in a collaborative way to provide four key deliverables:

- Prevention,
- Detection,
- Enforcement, and
- Education.

Primary amongst these deliverables is prevention. Whilst the model is also geared towards early detection, and as a consequence risk mitigation and treatment; it is prevention that has the greatest emphasis.

Dust management and control – A prevention focus

Summary of components

Coal Services' comprehensive programme includes assisting the industry in development, approval and audit of dust control management plans, monitoring and compliance of statutory requirements, identification and dissemination of best practice solutions and maintaining education to help to ensure that complacency does not occur.

Occupational Hygiene Services, a business unit of Coal Services, is NATA accredited with almost 70 years' experience providing dust monitoring services to the NSW coal mining industry.

Established in the 1940's in response to escalating occupational health concerns within the industry, especially dust-related lung disease (coal workers pneumoconiosis, or 'black lung') the team now provides a range of hygiene services including testing noise, vibration, lighting, diesel particulate and dust monitoring, as well as providing training on leading workplace hygiene practices.

The Coal Services Occupational Hygiene team include a broad and multi-discipline skill set incorporating hygienists, specialist laboratory technicians and coal industry experienced inspectors. In Coal Service's view, being an effective licenced provider requires more than simply applying personal dust monitors and being a NATA accredited laboratory. The Coal Services inspectors are typically experienced underground mining practitioners (mine deputies or above), and are considered integral to the programme's success. Our

inspectors travel underground with the mining crew to conduct the dust monitoring, observe operational practices, audit control measures and provide on the spot guidance and education to the underground miners literally “at the coal face”. They work collaboratively with mine management to design, implement and monitor the effectiveness or improvement opportunities of any corrective actions that have been implemented to rectify exceedances.

The dust mitigation programme that is undertaken can be summarised as follows:

Airborne dust exposure limits

Airborne dust exposure limits are prescribed by the *NSW Work Health and Safety (Mines) Regulation 2014* as ‘respirable dust... in the case of a coal mine, 2.5 milligrams per cubic metre of air and inhalable dust, 10 milligrams per cubic metre of air.’

For the purposes of this submission, we will refer mainly to respirable dust since it is the more pertinent size fraction leading to ‘Black Lung’.

The legislative airborne dust monitoring requirements are pursuant to the Regulation which prescribes monitoring requirements for respirable coal dust including specific locations and frequencies.

The Regulation also directs that the provider of statutory monitoring must be independent of the mine and must be licensed by the NSW Department of Industry (Division of Resources and Energy).

If there are exposure limit exceedances there must be a re-sampling.

Order 40 (Appendix A) – Longwall dust abatement approvals

Regarding Orders made pursuant to the *Coal Industry Act 2001*, Order 40 dealing with ‘Abatement of Dust on Longwalls’ provides that the ‘manager or owner of a coal mine must obtain the consent in writing of the Board prior to the installation of a longwall or a shortwall unit underground and prior to its installation on a new longwall block or shortwall pillar or panel, as the case may be.’

Order 40, as administered by Coal Services, includes a review and approval process; review of all results from each mines previous longwall block considered prior to approval and additional conditions placed on longwall approval in situations where exceedance rates indicate potential for unacceptable exposures.

Further, a pro-forma ‘Order 40 Data’ form is required to be submitted to Coal Services for approval, and prior to the commencement of mining (**Appendix B**). Conditions of approval require a self-audit of dust mitigation elements nominated in the Order 40 application upon recommencement of operations.

Order 42 (Appendix C) – Mandatory monitoring and prescribed exposure levels

Order 42 has as its primary purpose compliance tracking, identification of high risk areas and activities and risk analysis regarding dust exposures. This Order is also administered by Coal Services.

With regard to dust monitoring, it should be further noted that:

- The approved sampling method adopted in the New South Wales coal industry is personal gravimetric sampling. Gravimetric dust sampling was introduced into the NSW coal industry in 1984 and continues to be the accepted methodology used today.
- As per the NSW Work Health and Safety (Mines) Regulation 2014, mine workers are sampled regularly. Order 42 requires monitoring of all crews in each separate work area of the mine to identify any systemic issues that may result from mining practices of a particular work team.
- Copies of all results are sent to the Mine Operator, Inspector of Coal Mines and Industry Safety and Health Representative. Following a failed result, the Mine Manager informs the person who was sampled and there is an obligation under the NSW Work Health and Safety (Mines) Regulation 2014 to conduct a review and take action to correct the situation. The whole crew is resampled to look for systemic issues, after the implementation of corrective actions which have been collaboratively developed between Coal Services and the mines management team.

Standing Dust Committee

Coal Services, through the Airborne Contaminants and Diesel Particulate Sub Committee (also known as the Standing Dust Committee (SDC)) also maintains an overview of all the results of the dust sampling programme and reviews all dust exceedances including contributing factors, any reviews and actions undertaken by the mine as a result of the exceedance, and respiratory personal protective equipment compliance.

The SDC is an expert advisory body with members from all parts of the industry including the Department and the Inspectorate, Industry Safety and Health Representatives, Coal Services, employers/operators, independent industry experts and workers. The Committee meets bi-monthly and meetings include mine visits to observe work practices.

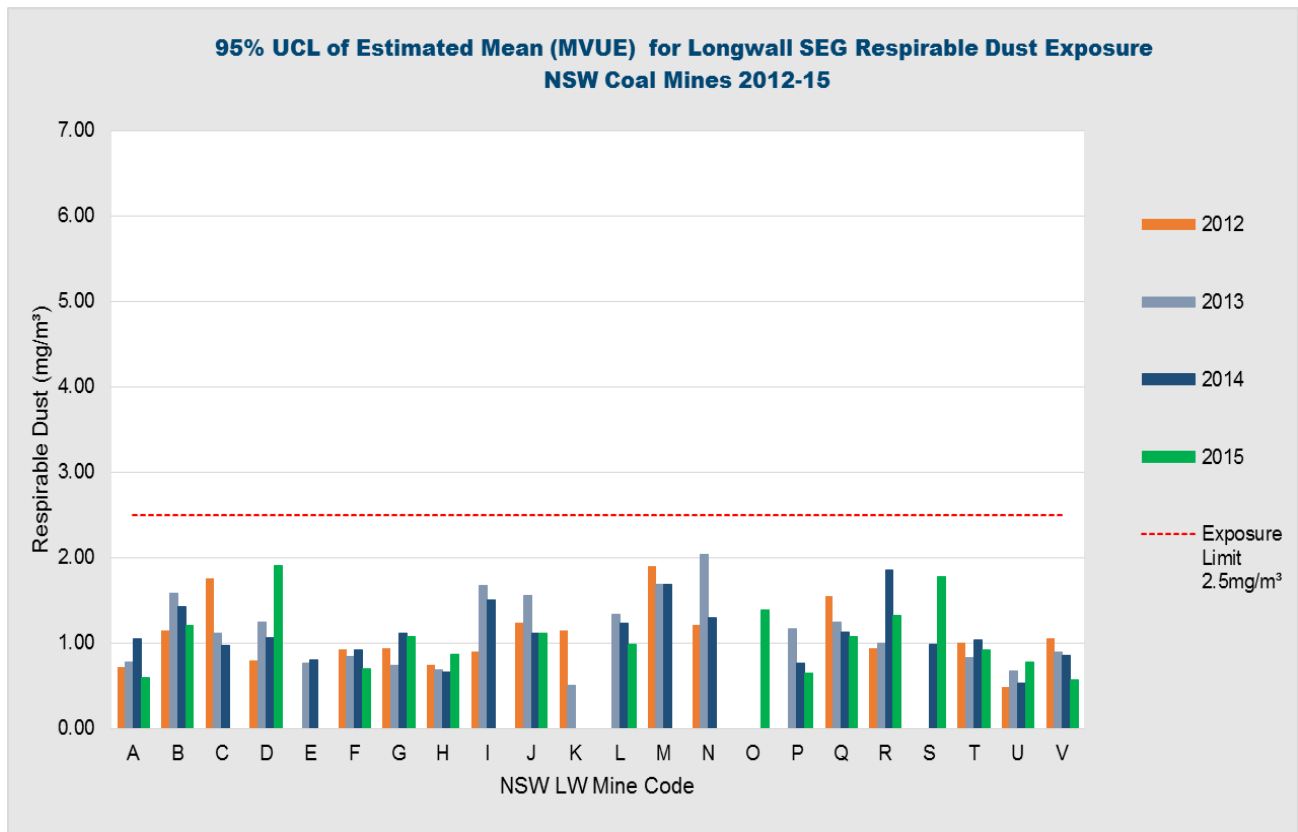
The Committee Charter is focussed on strong regulation and compliance and can be described in five main categories:

- Monitoring results of respirable dust,
- Evaluation of dust hazards,
- Research improved dust control methods,
- Disseminate information, and
- Educate mine personnel in matters related to dust control.

The SDC recommends the display of all results on the mine notice boards.

The Results

The graph below shows the success of the NSW coal industry in mitigating dust in underground longwall operations. This is a key indicator in terms of whether there may be a potential re-emergence of dust disease in NSW. The graph depicts the 95% Upper Confidence Limit (UCL) of the Estimated Mean/MVUE of respirable dust exposure over the years 2012-15 for all NSW underground longwall operations. The 95% UCL is a more stringent measure than just using the Estimated Mean/MVUE.



Note that each year the exposure limits are well below the statutory limit of 2.5mg/m³ as prescribed by the *NSW Work Health and Safety (Mines) Regulation 2014*.

Health Surveillance - A lag measure and a safety net

Summary of detection measures

Whilst prevention is undoubtedly the best option, health surveillance is a critical safety net completing the mineworker health protection system.

CS Health, a business unit of Coal Services, has almost 70 years' experience providing occupational health services to the NSW coal mining industry.

CS Health provides specialised occupational health services from an experienced and multidisciplinary team of specialist doctors, nurses, radiographers, rehabilitation counsellors, occupational therapists, physiotherapists and remedial therapists.

With offices providing services throughout NSW, the health team administer occupational medicals, screening, treatment, injury prevention and rehabilitation services.

Coal Services has a strong health regime which is designed to detect any occupational disease, including pneumoconiosis, through Order 41 'Coal Services – Health Surveillance Requirements for New South Wales Coal Mine Workers'.

Order 41 (Appendix D) – Health surveillance requirements for New South Wales Coal Mine Workers

The key points of the Order 41 health surveillance programme can be summarised as follows:

- A pre-employment medical is required for all workers before they commence work in the NSW coal industry. This includes a chest x-ray for new entrants to the industry. The medical and chest x-ray serve as a baseline for future health surveillance. For workers already in the industry undergoing a pre-employment medical, a chest x-ray would only be conducted if it was due as per the requirements of the Order, or if clinically indicated.
- The health surveillance medical (known as the Periodic Health Assessment) is required every three years. The Periodic Health Assessment focuses on a range of occupational health issues including dust, noise, fatigue and vibration. It also includes an assessment for general health issues that may impact on a worker in the workplace including an assessment of the cardiovascular system, general health issues, mental health, musculoskeletal issues and alcohol use.
- The Order requires a chest x-ray each six (6) years for miners with a history of possible hazardous dust exposure. In addition, the assessing medical practitioner may recommend additional chest x-rays if clinically indicated. Underground miners undertake a chest x-ray each six years due to potential for dust exposure, opencut miners generally each 12 years due to their more limited exposure. (Opencut miners may undergo more frequent x-rays if their exposure history indicates the need or if clinically indicated).
- The pre-employment medical must be conducted by a Doctor registered to practice in Australia. The periodic health assessment can be conducted by a Doctor, or by a Registered Nurse under the supervision of a Doctor.

Chest X-rays

Chest x-rays are conducted by CS Health in its Singleton and Lithgow facilities. Other offices utilise local x-ray providers. All x-ray referrals notify the radiologist that the worker is a coal miner and to specifically look for any indication of dust disease. All x-rays and reports are reviewed by a Radiologist who identifies any abnormalities. X-rays identified as not normal are further investigated. CS Health has processes developed to ensure that all abnormal x-ray results are referred to an appropriate medical professional for further investigation and review.

The most common causes of abnormal results in the last few years were due to non-respiratory related health issues such as an enlarged heart or due to high blood pressure and bony abnormalities such as scoliosis.

Specific lung conditions also identified in that period included:

- Old scarring due to previous lung infections,
- Plaque due to previous asbestos exposure,
- Tuberculosis,
- Tumours,
- Sarcoidosis (autoimmune inflammatory disease), and
- Granuloma (a mass of tissue typically produced in response to infection, inflammation or the presence of a foreign substance).

Other preventative measures

Coal Services also provides other complimentary preventative services both as part of their statutory services and as commercial services.

Order 34 (Appendix E) – Approval of training Schemes

One of the general functions of Coal Services in the *Coal Industry Act 2001* is ‘approving training schemes required for a safety management system under the *Work Health and Safety (Mines) Act 2013*’.

Order 34 was issued to give operators of a coal operation direction on what is required in a training scheme for the health and safety management system. This is referred to as the coal operation’s Training and Competence Management Scheme (TCMS). Order 34 provides scope for Coal Services to issue ‘Guidelines’ on the required provisions to be included in a TCMS in order for it to be approved. This is referred to as the ‘Order 34 Guideline’.

The Order 34 Guideline is used as the basis for:

- the development of a TCMS by a coal operation,
- Coal Services approval of a coal operation’s TCMS, and any revision to the TCMS – this approval is based on meeting the requirements of the ‘Order 34 Guideline’, and
- criteria for audits conducted by officers of Coal Services of the TCMS and associated training / competency systems and processes at coal operations.

Fit-testing of personal protective equipment (PPE)

Testing of PPE is an essential component to protect against exposure to workplace hazards such as noise, dust gas and fumes.

Respiratory fit testing is recommended under Australian Standard 1715:2009 and should be performed on all tight-fitting respirators every twelve months. Fit testing is used to assess whether the respirator forms an adequate seal around the face and verifies whether the user has an adequate level of protection. A face mask or other respiratory device is only one line of defence in terms of dust protection, and should not be used in isolation.

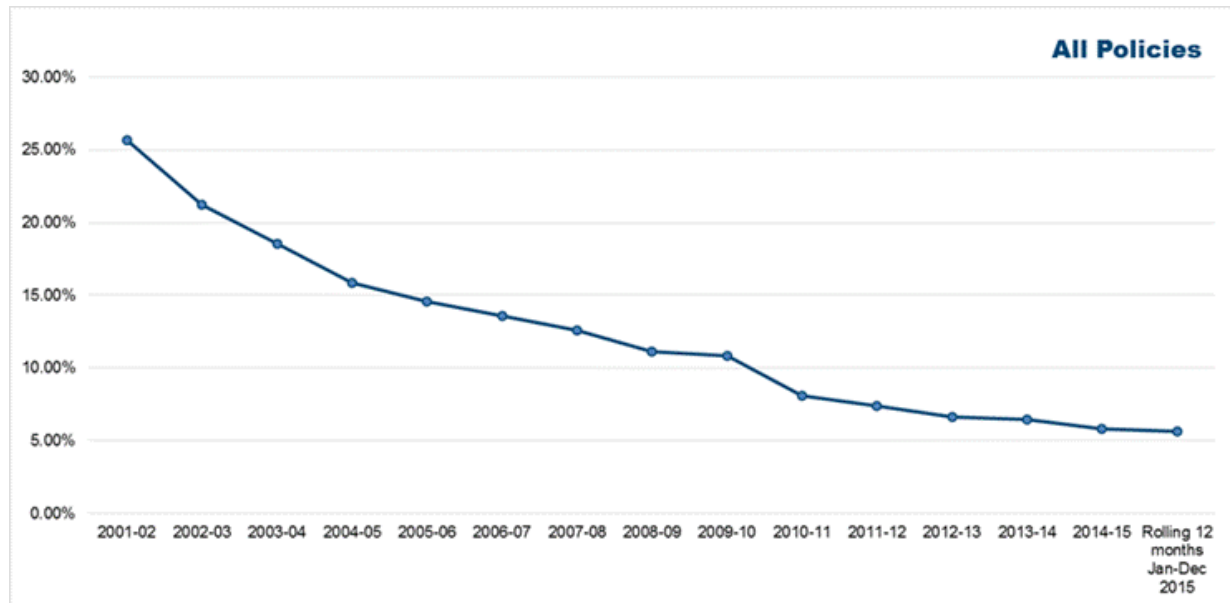
Generic Underground Induction Course

Mines Rescue, a part of Coal Services, has 90 years’ experience, assisting the mining industry to manage risk and operate safely. Mines Rescue’s primary and statutory role is to provide underground incident response, however, Mines Rescue also play a pivotal role in training to ensure the highest quality safety standards are maintained in the NSW coal industry.

One example of this is the Generic Underground Induction course which provides participants with the required skills and knowledge to be able to enter the underground coal mining industry and pursue a safe and healthy career as an underground coal miner. This course provides various skills including WHS requirements, correct use of PPE, hazard identification/risk control, communication, work environment awareness, self-escape and equipment and machinery awareness.

Conclusion

The collaborative model adopted in the NSW coal industry has delivered outstanding results not just in the form of compliant dust levels but in the reduction of injuries across all of the industry including open cut as well as underground. The graph below shows a reduction in claims received as a result of occupational disease or injury over the last 14 years - a **reduction of over 75%**.



It is clear that prevention of exposure is key when it comes to protection against any form of occupational disease or injury. Mandated exposure standards and legislated monitoring regimes are an essential element of a robust system, as is the value of having highly experienced coal mine practitioners monitoring and conducting the surveillance of coal mine workers, mining practices and controls. Complacency is a significant risk. Ongoing independent mandatory testing in relation to significant hazards guarantees that those controls that have been put in place continue to operate to keep the industry healthy, safe and productive.

ORDER NO. 40

Abatement of Dust on Longwalls

The JOINT COAL BOARD (“the Board”) pursuant to powers conferred by the Coal Industry Act 1946 of the Commonwealth of Australia and the Coal Industry Act, 1946 of the State of New South Wales hereby ORDERS as follows:-

1. This Order applies to the mining of coal underground by the longwall or shortwall methods.
2. This Order will operate throughout the State of New South Wales and takes effect from the date hereon.
3. The manager or owner of a coal mine must obtain the consent in writing of the Board prior to the installation of a longwall or a shortwall unit underground and prior to its installation on a new longwall block or shortwall pillar or panel, as the case may be.
4. The consent of the Board may be given subject to conditions.

Dated: 5 July 1990

Coal Services Pty Limited

ORDER No. 40
LONGWALL DATA

COLLIERY:

DISTRICT:

LONGWALL No:

COMENCEMENT DATE:

ANTICIPATED FINISHING DATE:

Seam: Seam Height: No. Of Chocks:

| | <u>LAST LONGWALL</u> | <u>NEW LONGWALL</u> |
|--------------------------|-----------------------------|----------------------------|
| Length of Face: | | |
| Length of Block: | | |
| Output per Shift: | | |

VENTILATION

Airflow:

Anticipated Face Quantity (m³/s):

BEAM STAGE LOADER

Structure:

Cover Material:

Discharge End:

Material Used at Discharge End:

Spray Access (BSL to Boot End)

Sprays Visible:

Sprays Easily Checked:

Spray Type:

Total No. Off sprays:

Sprays:

CRUSHER

Pick Type:

Spray Types in Use:

No. of Sprays on Crusher:

Sprays Accessibility:

Dust Extractor Fitted:

Curtain Fitted at Crusher Entry:

Material Used for Curtain:

Crusher R.P.M.:

SHEARER

Pick Type:

No. of Picks:

No. of Sprays – MG Drum:

No. of Sprays – TG Drum:

Pick Point Flushing – MG Drum:

– MG Drum:

Sprays Through Pick:

Shearer Clearer:

TYPE OF DRUMS USED

Type:

Drum Diameter(metres):

Cowls Fitted:

Rotation of Drums

Roof to Floor / Floor to Roof

R.P.M. of Drums – Maingate:

– Tailgate:

Haulage Speed - Shearing (m/min):

- Flitting (m/min):

Shearer Chassis

No. of Sprays on Body:

Types of Sprays:

No. of Sprays on Clearer Spray Bar:

Type of Sprays on Clearer Spray Bar:

Sprays - with ventilation:

- against ventilation:

Belt Fitted to Spray Bar:

GENERAL

Water Pressure at Shearer (kPa):

Water Filters on Shearer:

Water Flow to Shearer (litre/s):

Water Pressure available to BSL (kPa):

Water Flow to BSL:

SHEARER SEQUENCE OF CUTTING

Cutting Sequence:

Shearing Direction:

Control:

OPERATOR POSITIONS:

Shearer Driver No. 1

During Shearing:

During Flitting:

Shearer Driver No. 2

During Shearing:

During Flitting:

Chock Operator No. 1

During Shearing:

During Flitting:

Chock Operator No. 2

During Shearing:

During Flitting:

SUPPORT CONTROLS

Electro / Hydraulic:

Batch:

Hydraulic:

Remote / Manual:

Water Infusion:

Gas Drainage:

Shearer Manufacturer:

Chock Manufacturer:

RESPIRATORS

1. Identify Type:

2. Identify Operating System:

- Are respirator personalised?

- Maintenance program:

- Time between cleaning and filter changes:

- What training is given on use of respirator?

WHAT MODIFICATIONS HAVE BEEN CARRIED OUT TO DUST SUPPRESSION TECHNIQUES FROM YOUR PREVIOUS LONGWALL?

COAL INDUSTRY ACT 2001

ORDER NO. 42

Coal Services – Monitoring Airborne Dust

COAL SERVICES PTY LIMITED ACN 099 078 234 ('Coal Services'), pursuant to the powers conferred by the Coal Industry Act 2001 of New South Wales hereby ORDERS as follows:

1. An operator of a coal operation must allow persons appointed by Coal Services as Inspectors, pursuant to Section 25 of the Coal Industry Act 2001, to monitor airborne dust to:
 - (a) enter any coal operation for purposes related to monitoring airborne dust,
 - (b) to take dust samples, and
 - (c) to undertake all other functions and activities necessary to monitor airborne dust.

In this Order:

Monitoring airborne dust generally means, but it is not limited to, undertaking the activities and functions in Schedule 1.

SCHEDULE 1

Monitoring airborne dust

1. Monitoring airborne dust involves the regular collection and analysis of samples of airborne dust from the breathing zone of people whose health may be affected by the dust. The frequency of sampling, places and persons to be sampled in each part of a coal operation will be generally as specified in the Table below according to the operations in that part of the mine.

The Table gives minimum locations, frequencies and persons for sampling only. Where difficult, dusty or unusual circumstances occur, then rigorous sampling arrangements suitable to the circumstances will need to be undertaken

| <i>Column 1</i> <i>Location</i> | <i>Column 2</i> <i>Frequency of sampling respirable dust</i> | <i>Column 3</i> <i>Frequency of sampling respirable quartz- containing dust</i> | <i>Column 4</i> <i>Frequency of sampling inhalable dust</i> | <i>Column 5</i> <i>Persons to be sampled</i> |
|--|---|--|--|---|
| (a) In each part of a coal operation where longwall mining is carried out. | Each producing shift at intervals not exceeding six months. | Each producing shift at intervals not exceeding six months. | Each producing shift at intervals not exceeding twelve months. | Samples to be collected from the breathing zone of at least five persons including, where possible: <ul style="list-style-type: none"> • A Shearer operator. • Two powered support operators. • A deputy. • One other person selected by Coal Services Pty Limited. |
| (b) In each part of a coal operation where a continuous mining machine operates. | Each producing shift at intervals not exceeding twelve months. | Each producing shift at intervals not exceeding twelve months. | At intervals not exceeding twelve months. | Samples to be collected from the breathing zone of at least five persons including, where possible: <ul style="list-style-type: none"> • A continuous miner driver. • A sideman or cable handler. • A shuttle car driver. • A deputy. • A bootend attendant or other person selected by Coal Services Pty Limited. |

| <i>Column 1</i> <i>Location</i> | <i>Column 2</i> <i>Frequency of sampling respirable dust</i> | <i>Column 3</i> <i>Frequency of sampling respirable quartz- containing dust</i> | <i>Column 4</i> <i>Frequency of sampling inhalable dust</i> | <i>Column 5</i> <i>Persons to be sampled</i> |
|---|---|--|--|---|
| (c) In any part of an underground coal operation where cement products are being applied. | | | At intervals not exceeding twelve months. | Samples to be collected from the breathing zone of at least two persons including, where possible: <ul style="list-style-type: none"> • Persons loading cement into a mixer. • Persons spraying or applying cement products |
| (d) In any place in or about an underground coal operation other than those referred to in (a), (b) or (c) above, but including crusher stations. | At intervals not exceeding twelve months. | At intervals not exceeding twelve months. | At intervals not exceeding twelve months. | Samples to be collected from the breathing zone of at least one person. |
| (e) In any place in or about an open cut coal operation where dust may be present. | At intervals not exceeding twelve months. | At intervals not exceeding twelve months. | At intervals not exceeding twelve months. | Samples to be collected from the breathing zone of at least five persons including, where possible: <ul style="list-style-type: none"> • Drill operators, shotfirers and stemmers. • Mobile equipment operators. |
| (f) In any place in or about a coal preparation plant located within a coal operation where dust may be present. | At intervals not exceeding twelve months. | At intervals not exceeding twelve months. | At intervals not exceeding twelve months. | Samples to be collected from the breathing zone of at least five persons where available. |

- Any further samples required by this Order will be additional to these frequencies.
- Persons sampled must, as far as possible, remain at the same job for the duration of the test.
- In the case where Coal Services selects the person to be sampled, the selection must be based on those activities where persons are likely to be exposed to airborne dust.
- Failed samples will be re-sampled.
- Determination of respirable dust:
Samples are to be collected and analysed in accordance with Australian Standard AS2985 (Workplace Atmospheres – Method for Sampling and Gravimetric Determination of Respirable Dust), except where varied by this Order.
- Determination of respirable quartz:
The preferred methods of determination of respirable quartz are one of either ‘The Potassium Bromide Disc Infra Red Method’ or ‘The X-ray Diffraction Method’ as described in “Guidelines for Determination of Respirable Quartz”, publication MDG 3006 MRT 6, published by the Department of Industry & Investment – Mineral Resources.
- Determination of inhalable dust:
Samples are to be collected and analysed in accordance with Australian Standard AS3640 (Workplace Atmospheres – Method for Sampling and Gravimetric Determination of Inhalable Dust), except where varied by this Order.
- Sampling:
Where practicable, sampling should commence at the start of the shift and cease at the end of the shift and be as close as practicable to the working place, for example, ‘crib room to crib room’. The minimum sampling period is five (5) hours.

Definitions

In this Order:

'airborne dust' includes both respirable and inhalable dust, it is also known as 'airborne particulate matter' or 'airborne particulates'.

'breathing zone' has the same meaning as in Australian Standard AS2985 and AS3640.

'coal operation' has the same meaning as in Section 3 of the Coal Mine Health and Safety Act 2002.

'inhalable dust' has the same meaning as it has in Australian Standard AS3640 (Workplace Atmospheres – Method for Sampling and Gravimetric Determination of Inhalable Dust).

operator has the same meaning as in Section 3 of the Coal Mine Health and Safety Act 2002.

'quartz-containing dust' means respirable dust which contains five percent or more by mass of respirable quartz.

'respirable dust' has the same meaning as it has in Australian Standard AS2985 (Workplace Atmospheres – Method for Sampling and Gravimetric Determination of Respirable Dust).

'respirable quartz' means the quartz present in respirable dust.

Notes:

The data obtained from the dust sampling operations will be entered onto Coal Services' Dust Database for the purpose of monitoring workers' health as required by the Coal Industry Act 2001. Copies of the data will be distributed to the mine operator, Chief Inspector of Coal Mines and the Industry Check Inspector.

The Coal Industry Act 2001 provides that a person (an individual or a corporation) must not, without reasonable excuse, refuse or fail to comply with this Order:

Maximum penalty: 200 penalty units in the case of a corporation or 50 penalty units in the case of an individual.

Dated this 31st day of January 2011

Signed on behalf of COAL) Ron Land
SERVICES PTY LIMITED) Chairman
on the date abovementioned)
) Mark Coyne
) Managing Director/CEO

Approval granted to Coal Services Pty Limited to make this Order pursuant to Section 13 of the Coal Industry Act 2001:

Dated this 8th day of February 2011.

The Hon. STEVE WHAN, M.P.,
Minister for Primary Industries

FISHERIES MANAGEMENT ACT 1994

Notice of approval of the Recovery Plan for Black Cod

NOTICE is hereby given pursuant to section 220ZQ(1)(d) of the Fisheries Management Act 1994 that the Minister for Primary Industries has approved the recovery plan for Black Cod. The plan is available on the Industry and Investment NSW website at www.industry.nsw.gov.au or by phoning (02) 4916 3811.

BILL TALBOT,
Director
Fisheries Conservation & Aquaculture



Coal Services Pty Limited

ABN 98 099 078 234

Order 42 Explanatory Note

The Minister for Primary Industries approved **Order No. 42 Coal Services Pty Limited – Monitoring Airborne Dust** by notice in the Government Gazette on 11th February 2011.

The Order gives powers to Coal Services Pty Limited inspectors to enter coal mine operations for the purposes of monitoring airborne dust, collecting dust samples, and other functions and activities necessary to monitor airborne dust.

Potential changes to coal mining and national occupational health and safety legislation raised some concerns that the system that had produced world's best practice in dust monitoring and health outcomes may reduce the protection provided by specific legislation for a known health risk. The specific controls and procedures in place in NSW coal mining may no longer have been mandated but replaced with a regime that was yet to be proven to maintain current status. The risk was too great with mineworkers' health.

The newly introduced Order 42 achieves the very sensible outcome of having both the duty and the standard in the one place; the Coal Industry Act (2001). The current web of overlapping legal duties had been a constant source of frustration for mine managers and others who have had to search through various Acts, Regulations, Australian and International Standards, Codes of Practice and Guidelines.

Coal mine operations that choose to select Coal Services Pty Limited to perform their Coal Mine Health and Safety Act (2002) monitoring will see no difference. The Order is very closely aligned to the current Coal Mine Health and Safety Act (2002) Gazette Notice, 21st December 2007, with identical specified limits for inhalable and respirable dust, and locations and frequencies of sampling.

Coal Services Pty Limited has produced this information package for all industry stakeholders to explain the implications of Order 42 and to reinforce our commitment to a healthy work environment and the continued elimination of lung disease.



Coal Services Pty Limited

ABN 98 099 078 234

About Order 42

What is Order 42?

Coal Services Pty Limited developed Order 42 under the authority granted to it by the New South Wales Coal Industry Act (2001). Order 42 requires that Coal Services Pty Limited undertake airborne dust monitoring which includes collection and analysis of samples at all NSW coal mine operations to a prescribed standard, including location and frequency. Coal mine operators must grant access to Coal Services Pty Limited Inspectors to perform this task.

Why was it put in place?

To ensure that a system that has protected mineworkers' health and eliminated lung disease remains effective. Potential changes to legislation through the national harmonisation process may move the focus away from the current specific risk controls in this area.

Order 42 will also clarify the specific duties of Coal Services Pty Limited under the Coal Industry Act (2001). At present, a general duty to monitor is contained in the Coal Industry Act (2001), but the specific standards are contained in the Coal Mine Health and Safety Act (2002). Order 42 will place all requirements in one legislative framework.

Must I use Coal Services Pty Limited to conduct dust monitoring?

Coal mine operators must allow Coal Services Pty Limited to conduct dust monitoring in accordance with Order 42 to comply with their duties outlined in the Coal Industry Act (2001).

Coal mine operators must use a licensed provider to sample and analyse airborne dust under Clauses 38 and 39 of the Coal Mine Health and Safety Regulation (2006). Coal Services Pty Limited can provide this service concurrently with Order 42 sampling. Alternatively, a coal mine operator may choose to allow another licensed provider to perform this service.

Will Coal Services Pty Limited charge Operators for this service?

Coal Services Pty Limited will not charge for monitoring conducted to satisfy their duties under the Coal Industry Act (2001).

Coal Services Pty Limited will continue to charge for monitoring to satisfy coal mine operators' requirements under the Coal Mine Health and Safety Act (2002) if required to provide that service.



Coal Services Pty Limited

ABN 98 099 078 234

Will the Standing Dust Committee continue to operate?

Yes; the Standing Dust Committee will continue to visit mines and observe work practices as they have done for more than 50 years. This expert advisory body combines representatives from industry and will continue to focus on monitoring the results of respirable and inhalable dust samples, evaluating dust hazards, research improved dust control methods, disseminate and communicate information, and educate coal mines' personnel in matters related to dust control.

What will change?

Nothing will change if coal mine operators choose to continue using Coal Services Pty Limited to provide both Coal Industry Act (2001) and Coal Mine Health and Safety Act (2002) monitoring.

Coal mine operators can choose to select an alternative licensed provider for Coal Mine Health and Safety Act (2002) monitoring. This will be in addition to monitoring performed by Coal Services Pty Limited.

Who should I contact for further information?

Paul Healey
General Manager, Mines Rescue Service and Regulation & Compliance
Email: paul.healey@coalservices.com.au
Phone: 02 4922 4410

Gary Mace
Manager, Occupational Hygiene Services
Email: gary.mace@coalservices.com.au
Phone: 02 6571 9953

Department of Industry and Investment

COAL INDUSTRY ACT 2001

ORDER No. 41

Coal Services – Health Surveillance Requirements for New South Wales Coal Mine Workers

COAL SERVICES PTY LIMITED ACN 099 078 234 ('Coal Services'), pursuant to the powers conferred by the Coal Industry Act 2001 of New South Wales hereby ORDERS as follows:

Pre-placement Medical Assessments

1. An employer of a coal mine worker or a person who contracts a coal mine worker to work in a coal operation must not permit a coal mine worker to commence working in a coal operation unless:
 - I. they have caused the coal mine worker to undertake a pre-placement medical assessment; or
 - II. they are satisfied the coal mine worker has already undertaken a pre-placement medical assessment in the previous twelve months.
2. An operator of a coal operation in New South Wales must not permit a coal mine worker to commence work in a coal operation unless satisfied the coal mine worker has undergone a pre-placement medical assessment.
3. An employer of a coal mine worker or a person who contracts a coal mine worker who has caused a coal mine worker to undertake a pre-placement medical assessment must ensure a report of the assessment is provided to the Chief Medical Officer, Coal Services, within four (4) weeks of the finalisation of the assessment.

Periodic Health Surveillance Assessment

4. An employer of a coal mine worker or a person who contracts a coal mine worker to work in a coal operation must ensure each coal mine worker undergoes a periodic health surveillance assessment:
 - I. not more than three (3) years from the date of commencement of this Order and then no more than every three (3) years after that assessment; or
 - II. in the case of a coal mine worker who first commences work in a coal operation after the date of commencement of this Order:
 - a. not more than three (3) years after the date of their pre-placement medical assessment, or, not more than three (3) years after they commence working on coal extraction and/or treatment of coal at a coal operation, whichever is the earlier, and
 - b. no more than every three (3) years after that Periodic Health Surveillance Assessment.
5. An employer of a coal mine worker or a person who contracts a coal mine worker, must allow a coal mine worker to undertake a periodic health surveillance assessment during their normal weekly roster but not within ten (10) hours of finishing his or her last shift; and be liable for any payment with respect to the employee's attendance at any assessment.
6. An employer of a coal mine worker or a person who contracts a coal mine worker who has caused a coal mine worker to undertake a periodic health surveillance assessment must ensure a report of the assessment is provided to the Chief Medical Officer, Coal Services, within four (4) weeks of the finalisation of the assessment.

In this Order:

coal operation has the same meaning as in Section 3 of the Coal Mine Health and Safety Act 2002.

coal mine worker means a natural person working on coal extraction and/or treatment of coal at a coal operation.

contracts means to engage or hire the labour of a coal mine worker other than as an employee irrespective of how the engagement or hire occurs.

employer has the same meaning as in Section 3 of the Coal Mine Health and Safety Act 2002.

operator has the same meaning as in Section 3 of the Coal Mine Health and Safety Act 2002.

periodic medical assessment means a medical assessment of at least the factors in Schedule 1 (as revised from time to time and published on the Coal Services website) conducted by a registered medical practitioner or a registered nurse supervised by a registered medical practitioner.

pre-placement medical assessment means a medical assessment of at least the factors in Schedule 2 (as revised from time to time and published on the Coal Services website) conducted by a registered medical practitioner.

registered medical practitioner means a Doctor registered by the Medical Board of Australia to practice medicine in Australia.

registered nurse means a Registered Nurse (Division 1) registered by the Nursing and Midwifery Board of Australia to practice nursing in Australia.

Schedule 1

Factors to Consider in a Periodic Medical Assessment

The periodic medical assessment shall include an assessment of at least the following factors:

- detailed Medical History that pays particular attention to any disease or injury, both work and non-work related. It should also include a review of any medication usage;
- Spirometry and a review of the respiratory system, including the completion of a standardised respiratory questionnaire based on the MRC(UK) Respiratory Questionnaire 1986;
- hearing assessment, including audiometry;
- vision assessment, including visual fields and colour vision;
- blood pressure assessment;
- urinalysis, cholesterol check (non-fasting), blood sugar level, Body Mass Index (BMI);
- The Kessler Psychological Distress Scale (K10): The questionnaire aims to identify workers with significant levels of psychological distress so that they may be appropriately managed with respect to their ongoing health and wellbeing;
- The Epworth Sleepiness Scale (ESS): This assessment is intended to measure daytime sleepiness and can be helpful in diagnosing sleep disorders;
- Alcohol Audit: The Alcohol Use Disorders Identification Test (AUDIT) was developed by the World Health Organisation (WHO) as a simple method of screening for excessive alcohol consumption. It provides a framework for intervention to help risk or high-risk drinkers to reduce or cease their alcohol consumption. It also helps to identify alcohol dependence;
- Cardio Risk Assessment: A rating based on guidelines that have been developed for use by Physicians to assess the risk of cardiovascular disease (CVD) in adults without known CVD. The ranking is based on guidelines produced by the Australian and American Heart Foundations.
- hazard exposure questionnaire identifying all potential environmental hazards a worker may be exposed to and includes information on the use of PPE;
- work related skin disease questionnaire;
- musculoskeletal questionnaire;
- chest x-ray (five (5) yearly for miners with a history of possible hazardous dust exposure); and
- conclusions and recommendations.

Notes:

A hazard exposure questionnaire, work related skin disease questionnaire and musculoskeletal questionnaire have been developed by Coal Services Pty Limited for the New South Wales coal industry and are available on request for use in a health surveillance assessment.

SCHEDULE 2

Factors to Consider in a
Pre-placement Medical Assessment

The pre-placement medical assessment shall include an assessment of at least the following factors:

- a detailed medical history, including any past or present disease or injury and any use of medication;
- Spirometry and a review of the respiratory system, including the completion of a standardised respiratory questionnaire based on the MRC(UK) Respiratory Questionnaire 1986;
- hearing, including audiometry;
- vision, including visual fields and colour vision;
- a full musculoskeletal assessment that pays particular attention to any previous injury or underlying condition;
- a cardiovascular assessment;
- blood pressure assessment;
- urinalysis;
- Body Mass Index (BMI);
- Doctor's clinical examination and general health review, including tobacco smoking history, alcohol consumption and physical activity;
- neurological examination with particular attention to sensory or balance disorders, including the Romberg test for balance;
- chest x-ray (where the applicant has the chance of potentially hazardous exposures to coal or silica dust, unless an x-ray has been completed in the previous five (5) years); and
- Doctor's assessment of the overall fitness of the applicant for the proposed position, including any recommendations or work restrictions.

Notes:

1. The data obtained from each pre-placement medical assessment or periodic health surveillance assessment will be entered by Coal Services into its Health Assessment Database for the purpose of monitoring the health of the New South Wales coal industry as required by the Coal Industry Act 2001. This is in order to enable Coal Services to report on health trends, provide advice to the relevant Government agencies and the Minister and provide advice to coal mine operators. In doing so, the provisions of the Privacy and Personal Information Protection Act 1998 and the Health Records and Information Privacy Act 2002 will be adhered to.
2. In respect of the provisions of Clause 5 of this Order, if a registered Industrial Instrument has different terms from that which is contained in Clause 5 then the provisions of the Industrial Instrument will prevail over the terms of Clause 5 of this Order.
3. The Coal Industry Act 2001 provides that a person (an individual or a corporation) must not, without reasonable excuse, refuse or fail to comply with this Order – Maximum penalty: 200 penalty units in the case of a corporation or 50 penalty units in the case of an individual.
4. A person includes a natural person and a corporation.
5. The Coal Industry Act 2001 and the Coal Mine Health and Safety Act 2002 are available from www.legislation.nsw.gov.au

For further information contact the Coal Services on (02) 8270 3202.

Dated this 31st day of January 2011.

Signed on behalf of COAL) Ron Land
SERVICES PTY LIMITED) Chairman
on the date abovementioned)
) Mark Coyne
) Managing Director/CEO

Approval granted to Coal Services Pty Limited to make this Order pursuant to Section 13 of the Coal Industry Act 2001:

Dated this 8th day of February 2011.

The Hon. STEVE WHAN, M.P.,
Minister for Primary Industries

Schedule 1
(Revised November 2011)

Factors to Consider in a Periodic Medical Assessment

- The periodic medical assessment shall include an assessment of at least the following factors:
- detailed Medical History that pays particular attention to any disease or injury, both work and non-work related. It should also include a review of any medication usage;
- Spirometry and a review of the respiratory system, including the completion of a standardised respiratory questionnaire based on the MRC(UK) Respiratory Questionnaire 1986;
- hearing assessment, including audiometry;
- vision assessment, including visual fields and colour vision;
- blood pressure assessment;
- urinalysis, cholesterol check (non-fasting), blood sugar level, Body Mass Index (BMI);
- The Kessler Psychological Distress Scale (K10): The questionnaire aims to identify workers with significant levels of psychological distress so that they may be appropriately managed with respect to their ongoing health and wellbeing;
- The Epworth Sleepiness Scale (ESS): This assessment is intended to measure daytime sleepiness and can be helpful in diagnosing sleep disorders;
- Alcohol Audit: The Alcohol Use Disorders Identification Test (AUDIT) was developed by the World Health Organisation (WHO) as a simple method of screening for excessive alcohol consumption. It provides a framework for intervention to help risk or high-risk drinkers to reduce or cease their alcohol consumption. It also helps to identify alcohol dependence;
- Cardio Risk Assessment: A rating based on guidelines that have been developed for use by Physicians to assess the risk of cardiovascular disease (CVD) in adults without known CVD. The ranking is based on guidelines produced by the Australian and American Heart Foundations.
- hazard exposure questionnaire identifying all potential environmental hazards a worker may be exposed to and includes information on the use of PPE;
- work related skin disease questionnaire;
- musculoskeletal questionnaire;
- **Chest x-ray (six (6) yearly for miners with a history of possible hazardous dust exposure). The assessing medical practitioner may recommend additional chest x-rays if clinically indicated;**
- Conclusions and recommendations.

Notes: A hazard exposure questionnaire, work related skin disease questionnaire and musculoskeletal questionnaire have been developed by Coal Services Pty Limited for the New South Wales coal industry and are available on request for use in a health surveillance assessment.

SCHEDULE 2
(Revised November 2011)

Factors to Consider in a
Pre-placement Medical Assessment

The pre-placement medical assessment shall include an assessment of at least the following factors:

- a detailed medical history, including any past or present disease or injury and any use of medication;
- Spirometry and a review of the respiratory system, including the completion of a standardised respiratory questionnaire based on the MRC(UK) Respiratory Questionnaire 1986;
- hearing, including audiometry;
- vision, including visual fields and colour vision;
- a full musculoskeletal assessment that pays particular attention to any previous injury or underlying condition;
- a cardiovascular assessment;
- blood pressure assessment;
- urinalysis;

- Body Mass Index (BMI);
- Doctor's clinical examination and general health review, including tobacco smoking history, alcohol consumption and physical activity;
- neurological examination with particular attention to sensory or balance disorders, including the Romberg test for balance;
- **Chest x-ray (where the applicant has the chance of potentially hazardous exposures to coal or silica dust, unless an x-ray has been completed in the previous six (6) years); and**
- Doctor's assessment of the overall fitness of the applicant for the proposed position, including any recommendations or work restrictions.

Notes

1. The data obtained from each pre-placement medical assessment or periodic health surveillance assessment will be entered by Coal Services into its Health Assessment Database for the purpose of monitoring the health of the New South Wales coal industry as required by the Coal Industry Act 2001. This is in order to enable Coal Services to report on health trends, provide advice to the relevant Government agencies and the Minister and provide advice to coal mine operators. In doing so, the provisions of the Privacy and Personal Information Protection Act 1998 and the Health Records and Information Privacy Act 2002 will be adhered to.

2. In respect of the provisions of Clause 5 of this Order, if a registered Industrial Instrument has different terms from that which is contained in Clause 5 then the provisions of the Industrial Instrument will prevail over the terms of Clause 5 of this Order.

3. The Coal Industry Act 2001 provides that a person (an individual or a corporation) must not, without reasonable excuse, refuse or fail to comply with this Order – Maximum penalty: 200 penalty units in the case of a corporation or 50 penalty units in the case of an individual.

4. A person includes a natural person and a corporation.

5. The Coal Industry Act 2001 and the Coal Mine Health and Safety Act 2002 are available from www.legislation.nsw.gov.au

For further information contact the Coal Services on (02) 8270 3202.



Coal Services Pty Limited

ABN 98 099 078 234

About Order 41

What is Order 41?

Coal Services Pty Limited developed Order 41 under the authority granted to it by the New South Wales Coal Industry Act 2001. The Order was given the effect of Law by the NSW Government on the 11th February 2011 and requires that employers of coal mine workers or operators of coal operations in NSW ensure that pre-placement and periodic health surveillance medical assessments are completed for their workforce.

What is the purpose of Order 41? How will it benefit the coal industry?

The purpose of Order 41 is to assist in ensuring coal workers' health and safety.

Pre-placement medical results are used by employers to ensure that applicants for roles are able to perform the inherent physical requirements of the proposed role safely, as well as ensuring that no underlying medical conditions exist that may impact on a worker's safety in the workplace. Following this assessment a detailed report is provided to prospective employers and includes the Doctor's opinion of medical suitability for a proposed role.

The periodic health surveillance medical assessment is used to monitor workers for any adverse health effects as a result of exposure in the workplace. The periodic medical assessment will ensure workers' ongoing health is protected and that diseases such as pneumoconiosis or 'black lung' do not re-emerge within the coal mining workforce.

As most occupational illnesses take many years to develop, regular health surveillance allows for early detection and intervention with the goal of ensuring that a coal worker can continue to work safely. This is particularly important for workers as they age and assists in ensuring good health and quality of life

Medical results are confidential and dealt with in accordance with Federal Privacy Laws.

Employers receive a de-identified report on the overall health of their workforce; no individual medical data is included.

When must coal mine workers complete these medical assessments?

The Order requires that coal mine workers complete their pre-placement medical assessment prior to commencing work in a coal operation.

Every coal worker must undertake the periodic health surveillance medical assessment:

- not more than three (3) years from the date of the commencement of the Order (date) and then every three (3) years thereafter; or
- every 3 years from the date of the coal worker's pre-placement medical assessment carried out under the Order, or not more than three (3) years from the date they commenced work, whichever is earlier; and
- no more than every three (3) years after that.



Coal Services Pty Limited

ABN 98 099 078 234

Must operators and employers use Coal Services to conduct medicals?

No, employers do not have to use Coal Services to conduct their medical assessments. In the case though where other medical providers are utilised, all medical results must be sent to the Senior Medical Officer of Coal Services Health within 4 weeks of the completion of the assessment for inclusion in the Coal Services Health Industry Database. The results must be provided in the form required by Coal Services Health; a copy of these forms are available from the CS Health website www.cshealth.com.au

Who is responsible for selecting a medical provider to conduct the periodic health surveillance medical assessment?

All employees have a reasonable choice in the selection process and employers must consult with their employees for the selection of the Doctor and/or Nurse who will conduct the periodic health surveillance assessments.

How do employers submit the results of the medicals to Coal Services?

The medical results must be mailed to 'The Chief Medical Officer', Coal Services Pty Limited, PO Box 317 Singleton NSW 2330, or emailed to the 'Chief Medical Officer' at order41@coalservices.com.au

Whose responsibility is it to advise other medical providers of Order 41?

Should coal operators or employers choose to utilise the services of a medical provider other than Coal Services, it is their responsibility to ensure that their selected medical provider complies with the requirements of the Order regarding the required processes for the completion of the medical assessments. Please refer to gazetted attachment of Order 41.

What medical professionals can be used to conduct the medical assessments?

The Order sets forth minimum qualifications for health professionals conducting the medical assessment. In the case of the pre-placement medical assessment, a Doctor must conduct the medical. In the case of the periodic health surveillance medical assessment, a Doctor or Registered Nurse working under the supervision of a Doctor must complete the medical.



Coal Services Pty Limited

ABN 98 099 078 234

Can other health professionals be used to conduct all of the components of the pre-placement medical assessment and then have a Doctor simply review and sign off the medical?

No. To be deemed to have conducted the pre-placement medical assessment in line with the requirements of the Order the Doctor themselves must physically interview and complete a full examination of the client. The Doctor must then complete the declaration on the medical forms to verify that they have physically examined the applicant in determining their suitability for the role.

What are the components of the pre-placement medical assessment?

The pre-placement medical assessment shall include an assessment of at least the following factors:

- Detailed medical history, including any past or present disease or injury and any use of medication;
- Spirometry and a review of the respiratory system, including the completion of a standardised respiratory questionnaire based on the MRC(UK) Respiratory Questionnaire 1986;
- Hearing, including audiometry;
- Vision, including visual fields and colour vision;
- Full musculoskeletal assessment that pays particular attention to any previous injury or underlying condition;
- Cardiovascular assessment;
- Blood pressure assessment;
- Urinalysis;
- Body Mass Index (BMI);
- Doctor's clinical examination and general health review, including tobacco smoking history, alcohol consumption and physical activity;
- Neurological examination with particular attention to sensory or balance disorders, including the Rhomberg test for balance;
- Chest x-ray (where the applicant has the chance of potentially hazardous exposures to coal or silica dust, unless an x-ray has been completed in the previous five (5) years); and
- Doctor's assessment of the overall fitness of the applicant



Coal Services Pty Limited

ABN 98 099 078 234

What are the components of the periodic health surveillance medical assessment?

The periodic medical assessment shall include an assessment of at least the following factors:

- Detailed Medical History that pays particular attention to any disease or injury, both work and non-work related. It should also include a review of any medication usage;
- Spirometry and a review of the respiratory system, including the completion of a standardised respiratory questionnaire based on the MRC(UK) Respiratory Questionnaire 1986;
- Hearing assessment, including audiometry;
- Vision assessment, including visual fields and colour vision;
- Blood pressure assessment;
- Urinalysis, cholesterol check (non-fasting), blood sugar level, Body Mass Index (BMI);
- The Kessler Psychological Distress Scale (K10): The questionnaire aims to identify workers with significant levels of psychological distress so that they may be appropriately managed with respect to their ongoing health and wellbeing;
- The Epworth Sleepiness Scale (ESS): This assessment is intended to measure daytime sleepiness and can be helpful in diagnosing sleep disorders;
- Alcohol Audit: The Alcohol Use Disorders Identification Test (AUDIT) was developed by the World Health Organisation (WHO) as a simple method of screening for excessive alcohol consumption. It provides a framework for intervention to help risk or high-risk drinkers to reduce or cease their alcohol consumption. It also helps to identify alcohol dependence;
- Cardio Risk Assessment: A rating based on guidelines that have been developed for use by Physicians to assess the risk of cardiovascular disease (CVD) in adults without known CVD. The ranking is based on guidelines produced by the Australian and American Heart Foundations.
- Hazard exposure questionnaire identifying all potential environmental hazards a worker may be exposed to and includes information on the use of PPE;
- Work related skin disease questionnaire;
- Musculoskeletal questionnaire;
- Chest x-ray (five (5) yearly for miners with a history of possible hazardous dust exposure); and
- Conclusions and recommendations.



Coal Services Pty Limited

ABN 98 099 078 234

Do coal mines workers have to complete every component of the medical assessment?

Every component of the medical is vital in protecting a worker's ongoing health. The assessments utilised are recognised tests, widely used in the general community. If a coal worker feels that they cannot complete any component of the assessment they should discuss this with the attending Doctor or Nurse.

Does a coal mine worker have to undertake the medical assessments in their own time?

Pre-placement medical assessments are generally completed in a coal mine worker's own time. The Order requires that employers allow coal mine workers to attend for periodic health surveillance medical assessments in their normal shift time, but not within ten (10) hours of the completion of a shift. If a registered Industrial Instrument has different terms from that contained in the Order, then the provisions of the Industrial Instrument will prevail over the Order.

Does a coal mine worker have a chest x-ray each time they attend for a medical assessment?

No. The frequency of chest x-rays is dependent on the coal mine worker's history of exposure to dust. A coal mine worker in an underground mining environment should have an x-ray each five (5) years, but this may be longer for coal mine workers without significant exposure. The Doctor will refer coal mine workers for a chest x-ray based on the medical examination and dust exposure history.

How do operators and employers book a medical through Coal Services?

The contact details for each of the Coal Services offices can be found at www.cshealth.com.au

Please telephone your nearest Coal Services office to arrange medical appointments. To ensure that your medical needs are met, medical appointments should be booked well in advance of when new employees are due to commence on a coal mine site.

Medical reports following assessments are generally provided within 24 hours of the completion of the assessment, unless our Doctors require additional medical information from a client's own Doctor or Specialist to complete the assessment.



Coal Services Pty Limited

ABN 98 099 078 234

Where do coal mine workers have to attend Coal Services for the medical assessments?

Coal Services has offices in each of the major mining centres in New South Wales, including Lithgow, Singleton, Speers Point and Woonona. Coal Services can conduct medicals in their offices or can attend sites to complete medical assessments in a fully equipped mobile health unit. Medicals can be conducted in an employer's premises should these be deemed suitable by Coal Services medical staff and the coal mine worker. Should external medical providers be utilised by employers the location for attendance will be advised by the employer.

Who should arrange the medical assessments?

Employers should arrange medical assessments on behalf of their employees.

Will Coal Services charge operators and employers for pre-placement medical assessments?

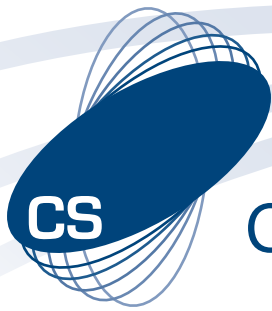
For those coal operators and employers that hold an insurance policy with Coal Mines Insurance there will be no direct charge for the pre-placement medical assessments outlined in the Order when provided by Coal Services. Additional services, such as functional capacity evaluations and drug and alcohol screening, will attract a service fee. Should operators or employers choose to utilise the services of another medical provider then it will be up to that medical provider to set the service fees.

Will Coal Services charge operators and employers for periodic health surveillance medical assessments?

For those coal operators and employers that hold an insurance policy with Coal Mines Insurance there will be no direct charge for the periodic health surveillance medical assessments outlined in the Order when provided by Coal Services. Should operators or employers choose to utilise the services of another medical provider then it will be up to that medical provider to set the service fees.

What penalties could operators and employers incur if they don't meet the requirements of Order 41?

The Order contains penalties for non-compliance. These penalties include a fine of up to 200 penalty points or \$22,000 for corporations and 50 penalty points or \$5,500 in the case of an individual. In any case of a breach of the Order the individual circumstances of the breach will be examined before determining any penalties to be incurred.



Coal Services Pty Limited

ABN 98 099 078 234

Can a coal mine worker be penalised if they don't attend the medical?

The Order does not allow for coal mine workers to be penalised for non-attendance at medicals but the New South Wales Coal Mines Health and Safety Act 2002 (section 59) does require workers to comply with any health and safety management systems employers may have in place. Workers should understand that their employer will be advised if they fail to attend for an assessment arranged through Coal Services.

How are the medical results used? Are they confidential?

The purpose of the medical assessments is to assist in ensuring coal workers' health and safety. Pre-placement medical results are used by employers to ensure that applicants for roles are able to perform the inherent physical requirements of the proposed role safely, as well as ensuring that no underlying medical conditions exist that may impact on a worker's safety in the workplace. Following this assessment a detailed report is provided to prospective employers and includes the Doctor's opinion of medical suitability for a proposed role.

The periodic health surveillance medical assessment is used to monitor workers for any adverse health effects as a result of exposure in the workplace. As most occupational illnesses take many years to develop, regular health surveillance allows for early detection and intervention with the goal of ensuring that a coal worker can continue to work safely.

Medical results are confidential and dealt with in accordance with Federal Privacy Laws. Employers receive a de-identified report on the overall health of their workforce; no individual medical data is included.

When may periodic health surveillance medical assessment results be released to another party?

The periodic health surveillance medical assessment results are not released to a third party unless specific written consent is obtained from the coal mine worker. An example of this may be a request for a coal mine worker's consent to discuss an identified medical condition with their treating Doctor for the purpose of ensuring an ongoing health management plan is in place.

On rare occasions, and only under very limited circumstances, would specific medical results be released to an employer; this would only occur following discussion with the coal mine worker and their authorised representative regarding the situation.



Coal Services Pty Limited

ABN 98 099 078 234

Must operators and employers complete medicals for all the people they employ that work on a coal operation?

Not necessarily. The Order defines a 'coal mine worker' as 'a person working on coal extraction and/or treatment of coal at a coal operation'.

The practical application of this definition is any person at a coal operation, as defined in section 3 of the Coal Mines Health and Safety Act 2002, who is directly involved in the extraction and/or treatment of coal, or is directly exposed to the possibility of health risks or impairments that are the subject of medical assessment and health surveillance as detailed in the Order.

From an occupational health perspective, the medical assessments detailed in the Order are designed to monitor for health risks associated with exposure to dust, musculoskeletal injury, hearing loss, vision impairment, fatigue and occupational dermatitis.

This would mean, for example, that persons engaged in clerical work in an administration building on a coal operation would, in most cases, not be required to complete the medical assessments due to their limited exposure to occupational health risks. On the other hand, coal mine workers that are engaged in tasks perhaps not directly involved in the extraction of coal but that may lead to an occupational illness or injury that is subject to detection by the medical assessments outlined in the Order should be medically assessed as per the requirements of the Order.

The definition of a 'coal mine worker' in the Order is designed to ensure that those at risk due to exposure to either occupational or environmental hazards on a coal operation site undergo medical assessments to ensure their health is protected.

I'm an operator of a coal operation in NSW. Am I responsible for ensuring that any Contractors on my site comply with the Order?

In regards to Contractors, the employer of the Contractor, whether they be an individual, partnership or Corporation, are responsible for ensuring they comply with the Order and for arranging to have their employees medically assessed as required by the Order. In the case of Contractors that are a sole proprietor they must ensure they comply with the Order.

Coal operators, through their normal Contractor Management System, must satisfy themselves that any Contractors utilised on the coal operation are complying with the Order.

In the event of a breach of the Order by a Contractor, the Contractor is liable.



Coal Services Pty Limited

ABN 98 099 078 234

Will operators and employers receive any reports from Coal Services on compliance to Order 41?

Yes. Coal Services will be able to provide details on the last attendance for a medical assessment for your employees. At the same time you will receive regular reports from Coal Services on the health of your workforce. These reports will contain de-identified data so that coal mine workers' medical privacy is protected. Coal Services medical team members will meet with you and discuss your workers' results. Coal Services is then able to work with you to implement solutions that suit your business needs, while addressing any adverse health trends identified.



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SPECIAL SUPPLEMENT

COAL INDUSTRY ACT 2001

ORDER NO. 34

COAL SERVICES PTY LIMITED ACN 099 078 234 ('Coal Services'), pursuant to the powers conferred by the Coal Industry Act 2001 of the State of New South Wales hereby **ORDERS** as follows:

1. This Order replaces Order 34 issued by the Joint Coal Board on 9 October 1979 and amended by it on 12 February 1985 and 31 August 1995.
2. This Order may be cited as "Coal Services Approval of Training Schemes for NSW Coal Mine Operator Health and Safety Management Systems".
3. The operator of each coal operation in the State of New South Wales shall, on and from the commencement date for that coal operation, submit to Coal Services, and apply to Coal Services for approval of, a training scheme for the health and safety management system for that coal operation.
4. The operator of a coal operation in the State of New South Wales which is not in production at the date of this Order shall, prior to commencement of production from that coal operation, submit to Coal Services, and apply to Coal Services for approval of, a training scheme for the health and safety management system for that coal operation.
5. A proposal for the training scheme for a health and safety management system shall be in such form as Coal Services may require and, subject to any guidelines that Coal Services may issue from time to time, and shall include provisions for:
 - (a) training and assessment of new employees at the coal operation;
 - (b) training and assessment of employees who are to be engaged on work of a nature different to that on which they have previously been engaged at the coal operation.
 - (c) assessment and maintenance of competency of persons to continue to perform allocated tasks at the coal operation.
 - (d) assessment of competency of contractors and other persons who may from time to time perform tasks at the coal operation.
 - (e) compliance auditing of the approved training scheme from time to time by an officer of Coal Services
6. The approved training scheme for a coal operation means the training scheme from time to time approved by Coal Services for the coal operation and of which notice of approval by Coal Services has been given to the operator by an authorised officer of Coal Services.

In this Order:

- (a) 'operator' and 'coal operation' have the same meanings as separately defined in s3 of the Coal Mine Health and Safety Act 2002

- (b) 'health and safety management system' means the system required to be prepared by an operator for a coal operation under s20 of the Coal Mine Health and Safety Act 2002
- (c) 'competency' has the same meaning as set out in clause 162 of the Coal Mine Health and Safety Regulation 2006'

Dated this 1st day of July 2007

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|----------------------------|---|-----------------------|
| Signed on behalf of COAL |) | Ron Land |
| SERVICES PTY LIMITED |) | Chairman |
| on the date abovementioned |) | Tony Middlebrook |
| |) | Managing Director/CEO |

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