

Workplace Exposure Limits

FED

Georgia Holmes

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MASTER
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Master Electricians Australia (MEA) is the industry association representing electrical contractors recognised by industry, government and the community as the electrical industry's leading business partner, knowledge source and advocate. You can visit our website at www.masterelectricians.com.au

1) What policy option do you support? *

☐ Option 1: Retain the current workplace exposure standard (WES)

☒ Option 2: Change to the proposed workplace exposure limit (WEL)

1a) Please explain why you support the option you have chosen.

The health and safety of all stakeholders in the electrical industry remain a top priority for MEA and its members. It is concerning to hear that silica is attributable to the "highest number of claims" out of the nine chemicals under review.

With an estimated \$9.8 billion health cost savings projected over a 10-year-period, addressing occupational illnesses caused by hazardous exposure is critical. Reducing occupational illness from dangerous levels of exposure reduces the unwarranted levels of distress, debilitating conditions and financial burdens on employees and their support networks. Additionally, they significantly impact Australia's economy through medical expenses, recovery costs, and ongoing support for terminal conditions. MEA fully supports initiatives aimed at reducing workplace fatalities and disabilities.

2) If you support Option 2, what timeframe would you consider necessary to comply with the proposed exposure limit if was implemented?

MEA supports the 1 December 2026 timeframe for WEL to come into effect.

3) What challenges will your business, employer or industry experience if Option 2 is implemented? Where possible, please provide evidence to support your response.

Transitioning to the WEL framework enhances safety for industry stakeholders but introduces challenges, particularly for small businesses. The discussion paper estimates a cost of \$1,100 for small businesses, in addition to ongoing administrative and compliance requirements. Many small businesses may struggle to stay informed and adapt due to limited resources. MEA strongly urges the provision of clear, concise guidelines, effective communication channels, and timely information to ensure businesses have reasonable time to comply.

Additionally, we advocate for financial assistance to support small businesses during this transition. In the current cost-of-living crisis, even modest cost increases can jeopardise a business's going-concern, making financial support critical to their continued operation.

4) What proportion of workers work with the chemical at your business or workplace?

☐ Less than 5%

☐ 5% – 25%

☐ 26% – 50%

☐ 51% – 75%

☒ 76% – 100%

5) What additional controls, beyond what you currently use, will your business, employer or industry need to manage worker exposure to the chemical if the proposed WEL (Option 2) is implemented?

If available, please provide average annual cost information and identify the type of control (i.e., isolation, engineering, administrative or personal protective equipment).

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- Worker awareness and engagement for compliance
 - Housekeeping and maintenance controls
 - Increased Personal Protective Equipment controls

6) What management costs (e.g. air monitoring, occupational hygienist), beyond what you currently incur, will your business, workplace or industry need if the proposed WEL (Option 2) is implemented?

If available, please provide average annual cost information to support your response.

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- Increased compliance documentation and reporting
 - Increased risk management systems
 - Administrative overheads – may result in more staff needing to be hired to monitor and comply with the WEL.
 - Increase expenses for health monitoring or FIT testing related to RPE.

7) What direct financial benefits would the proposed WEL (Option 2) provide if it is implemented? Where possible, please provide evidence to support your response.

Examples of direct benefits, attributed to reduced workplace exposure to airborne contaminants include (but are not limited to):

- reduced direct compensation costs, like benefits paid directly to workers or their family,
 - reduced costs paid to workers as income replacement,
 - reduced medical costs, and
 - reduced costs involved with a worker returning to work following occupational disease or legal costs associated with compensation related expenses.
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- Likely reduction in workplace insurance claims thereby reducing premium costs
 - Streamlined efficiencies could result from operational changes made thereby reducing overall time and costs of projects
 - Long-term financial benefits including improved business reputation, reduced costly lawsuits and decreased operational disruptions.

8) What other quantifiable health benefits would the proposed WEL (Option 2) provide if it is implemented? Where possible, please provide evidence to support your response.

- Increased awareness and adoption of preventative practices

9) What other indirect benefits could the proposed WEL (Option 2) provide if it is implemented? Where possible, please provide evidence to support your response.

Examples of indirect benefits include, but are not limited to, reduced productivity losses and reduced burden on support networks (family and friends) due to occupational diseases.

- Improved worker productivity – not just from reduced health implications but from less hesitant workers concerned about exposure or potential long-term health complications being too high despite still being compliant with the WES.
- Retention of skilled workers in the industry.