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Australasian Faculty of
Occupational and Environmental Medicine

3 January 2019

Mr Dean Barr
A/Director
Coal Mine Workers' Health Scheme
Department of Natural Resources, Mines and Energy
Level 18, 275 George St
BRISBANE QLD 4000

Via Email: minershealth@dnrme.qld.gov.au

Dear Mr Barr

Feedback on the Expert Medical Advisory Panel (EMAP) Consultation Paper

Thank you for inviting the Australasian Faculty of Occupational Medicine (AFOEM) of The Royal Australasian College of Physicians (RACP) to provide feedback on the Expert Medical Advisory Panel (EMAP) Consultation Paper released for consultation by the Department of Natural Resources, Mines and Energy (DNRME) in December 2018.

AFOEM represents specialist occupational and environmental physicians in Australia and New Zealand. We are committed to establishing and maintaining the highest standards of practice in occupational and environmental medicine in Australia and New Zealand through training, continuing professional development and advocacy.

AFOEM commends the Queensland Government and the DNRME for taking a leading role in implementing respiratory health screening and surveillance for all Queensland's coal mine workers. We note that some of our expert Fellows have been leading the valuable work of the Coal Mine Dust Lung Disease (CMDLD) Collaborative Group, which has, amongst other things, developed the Coal Mine Workers' Health Scheme (CMWHS) Clinical Pathways Guideline which the RACP and AFOEM have endorsed.

We are strongly supportive of the establishment of the EMAP to provide comprehensive, up-to-date and ongoing expert medical advice to support the regulatory framework being implemented by the Queensland Government to safeguard the health of miners and quarry workers.

AFOEM's recommendations to enhance the proposed EMAP model are as follows:

- Regarding the scope of the EMAP, AFOEM recommends adding the following components to cover the full breadth of roles specialist occupational and environmental physicians perform from prevention onwards:
 - provide expert strategic advice on rehabilitation

- provide expert strategic advice on the adequacy of, or need for changes in legislation and regulation relating to health screening and surveillance
- It would also be beneficial for the scope of the EMAP to include matters relating to workplace controls for various hazards. This would be facilitated by the addition of occupational hygiene expertise to the Panel, preferably as a permanent role rather than on a co-opted basis. The Australian Institute of Occupational Hygienists (AIOH) would be a useful organisation to consult about this point.
- In addition to the EMAP, AFOEM recommends the DNRME establish occupational multi-disciplinary teams or panels of suitably qualified medical specialists who have the role of determining or clarifying clinical diagnoses in individual mine workers with suspected dust-related lung disorders.

AFOEM would also recommend that the EMAP should be able to provide advice to other arms of the Queensland Government where urgent issues arise related to other occupational respiratory diseases. For example, if feasible, it could lend its professional and clinical expertise to the issue of respiratory disease in the stone benchtop industry where alarmingly high rates of accelerated silicosis have been uncovered in the past few months (approximately 1 in 3 workers being diagnosed¹).

On a related matter and to improve the effectiveness of the EMAP, AFOEM recommends the DNRME appoints an in-house specialist occupational and environmental physician (OEP) since the Department does not currently have this position in-house and this is a significant gap in AFOEM's view. An in-house OEP who would have (or develop) a knowledge of policies and procedures within the Department, set priorities, provide guidance and leadership, and be involved with auditing, review and quality assurance processes. This could be facilitated via the establishment of an OEP training position within the Department with a key part of the role including support of the EMAP and other medical panels either to be established or already in existence.

The RACP and AFOEM are very supportive of the Queensland Government's activities to safeguard the health of Queensland's coal mine workers and we strongly encourage the DNRME to continue engaging with the RACP, AFOEM and other key stakeholders in this area, in particular The Thoracic Society of Australia and New Zealand (TSANZ), The Australian and New Zealand College of Radiologists (ANZCR), the Australian and New Zealand Society of Occupational Medicine (ANZSOM) and the Australian Institute of Occupational Hygienists (AIOH), as the EMAP model is developed and implemented.

Many thanks again for this opportunity to provide AFOEM's feedback on the DNRME's proposed EMAP model, we trust the above recommendations will be helpful in refining the proposed EMAP model.

¹ <https://www.racp.edu.au/news-and-events/media-releases/call-for-regulators-to-address-public-health-crisis-in-the-artificial-stone-benchtop-industry> [last accessed 04/01/19]

Should you require further information about this correspondence or wish to call on our members' expertise and knowledge to assist you in these activities, please contact AFOEM on AFOEM@racp.edu.au.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Dr Beata Byok'. The signature is stylized with cursive lettering and a large, sweeping flourish at the end.

Dr Beata Byok
President AFOEM