Researchers estimate that...

5000 invasive cancers each year are caused by work-related exposure to hazardous chemicals and dust.¹

39% of workers are potentially exposed to dust, gases, vapours, smoke or fumes.²,³

25% of workers are potentially exposed to lead.¹

39% of workers are potentially exposed to dust, gases, vapours, smoke or fumes.²,³

16-17% of adult onset asthma cases are caused by preventable workplace exposures to asthmagens such as dusts and chemicals.⁴

40% of workers are potentially exposed to cancer causing substances at work.¹,⁴

19% of workers are potentially exposed to biological hazards including human body substances, animals and/or animal products.⁷

Priority disorder action plan: 2016-2018
Chemical, dust and infectious related disorders

Exposure routes

- Ingestion (stomach or digestive tract)
- Inhalation (respiratory tract)
- Dermal (skin)
- Mucous membranes (eyes, nose, mouth)
### What outcomes will be achieved

**Short term**
Workplace Health and Safety Queensland (WHSQ) inspectors and advisors improve and maintain their knowledge and awareness regarding identification of, and controls to prevent, exposure to chemical, dust and/or infectious substances.

**Medium term**
People use controls that eliminate or minimise hazards and risks to prevent exposure to chemical, dust and infectious substances.

**Long term**
Exposure to chemical, dust and infectious substances are minimised. Reduced incidence of chemical, dust and infectious related disorders associated with work.

### What will we deliver in 2016-2018

- Work related events likely to cause exposure are responded to by WHSQ.
- Education, training and mentoring programs are provided to WHSQ Inspectorate and Advisors.
- Partnerships are formed with external stakeholders to identify and promote effective control strategies.
- Responsive regulations, policy and guidance are provided to industry and the community by WHSQ.
- Industry and community engagement is undertaken to promote use of exposure control strategies.
- Verifying compliance with people who have duties under work health and safety legislation to manage risks associated with:
  - Legionella risk management for cooling towers
  - Using, handling and storing restricted carcinogens.

### Action areas

- Hazard areas are eliminated or minimised by design.
- Improved work health and safety through supply chains and networks.
- Improved work health and safety capabilities.
- Leaders in communities and organisations promote a positive culture for health and safety.
- Evidence-informed policy, programs and practice.
- Government improve work health and safety.
- The regulatory framework improves effectiveness by responding and adapting to changing circumstances.

### References:

3. Safe Work Australia 2010 National Hazard Exposure Worker Surveillance: Exposure to dust, gases, vapours, smoke and fumes and the provision of controls for these airborne hazards in Australian workplaces
7. Safe Work Australia 2011 National Hazard Exposure Worker Surveillance: Exposure to Biological Hazards and the Provision of Controls against Biological Hazards in Australian Workplaces, Australian Government, Canberra

**Note:** Illnesses arising from work-related exposure are significantly under reported in workers’ compensation data for a range of reasons including: lack of awareness of work-related risk factors amongst workers and health professionals; inherent difficulties in assigning a specific case to a work-related cause. Therefore, in order to prioritise work health and safety interventions, other sources of data such as those referenced above, are useful to estimate the extent of exposures.