



Strategic Review of the Workplace Health and Safety System

Submission template

This template can be used to make a submission to the Independent Taskforce on Workplace Health and Safety. The template does not limit the length of your answers, and you can attach documents to supplement your answers if you wish. Alternatively, you can use the on-line questionnaire to make a submission, which can be found at www.hstaskforce.govt.nz. The on-line questionnaire restricts the length of your answers to about 300 words per question.

Please refer to the taskforce's consultation document, *Safer Workplaces* before completing this template. The consultation document can be found at www.hstaskforce.govt.nz

About you

* Indicates mandatory questions

1. *Your full name:

Penelope Scott

2. *Is this submission on behalf of an individual or an organisation?

☐ Individual ☒ Organisation

Name of organisation:

3. *Region

- | | | |
|---|--|--|
| <input type="checkbox"/> Northland | <input type="checkbox"/> Whangarei | <input type="checkbox"/> Auckland |
| <input type="checkbox"/> Waikato | <input type="checkbox"/> Bay of Plenty | <input type="checkbox"/> Gisborne |
| <input type="checkbox"/> Hawke's Bay | <input type="checkbox"/> Taranaki | <input type="checkbox"/> Manawatu-Wanganui |
| <input type="checkbox"/> Wellington | <input type="checkbox"/> Marlborough | <input type="checkbox"/> Nelson |
| <input type="checkbox"/> West Coast | <input type="checkbox"/> Canterbury | <input checked="" type="checkbox"/> Otago |
| <input checked="" type="checkbox"/> Southland | <input type="checkbox"/> Overseas | |

4. *Respondent category

- | | |
|--|---|
| <input type="checkbox"/> Employer | <input type="checkbox"/> Not in paid employment |
| <input type="checkbox"/> Manager | <input type="checkbox"/> Occupational health nurse |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Health and safety practitioner |
| <input type="checkbox"/> Self-employed | <input checked="" type="checkbox"/> Other: |
| <input type="checkbox"/> Employee representative | <input type="text" value="NGO - Reducing the incidence"/> |

5. *Which type of industry do you manage, own a business in, or work in?

- ☐ Agriculture
- ☐ Forestry
- ☐ Fishing
- ☐ Mining
- ☐ Manufacturing
- ☐ Electricity, Gas, Water and Waste Services
- ☐ Construction
- ☐ Wholesale Trade
- ☐ Retail Trade
- ☐ Accommodation and Food Services
- ☐ Transport, Postal and Warehousing
- ☐ Information Media and Telecommunications
- ☐ Financial and Insurance Services
- ☐ Rental, Hiring and Real Estate Services
- ☐ Professional, Scientific and Technical Services
- ☐ Administrative and Support Services
- ☐ Public Administration and Safety
- ☐ Education and Training
- ☒ Health Care and Social Assistance
- ☐ Arts and Recreation Services
- ☐ Other Services

6. *Size of business that you own / manage or work for?

- | | |
|--|---|
| <input type="checkbox"/> Self employed | <input checked="" type="checkbox"/> 20-49 employees |
| <input type="checkbox"/> 1-5 employees | <input type="checkbox"/> 50-99 employees |
| <input type="checkbox"/> 6-9 employees | <input type="checkbox"/> 100+ employees |
| <input type="checkbox"/> 10-19 employees | |

7. Gender

☐ Male ☒ Female ☐ Other

8. Age

- | | |
|--------------------------------|---|
| <input type="checkbox"/> 15–24 | <input checked="" type="checkbox"/> 45–54 |
| <input type="checkbox"/> 25–34 | <input type="checkbox"/> 55–64 |
| <input type="checkbox"/> 35–44 | <input type="checkbox"/> 65+ |

9. Ethnicity

- | | |
|--|--|
| <input type="checkbox"/> NZ Maori | <input type="checkbox"/> Asian |
| <input checked="" type="checkbox"/> European | <input type="checkbox"/> Middle Eastern/Latin American/African |
| <input type="checkbox"/> Pacific Island | <input type="checkbox"/> Other ethnic group |
| <input type="checkbox"/> Other European | <input type="checkbox"/> Do not wish to indicate |

10. Your contact details

Phone number(s)

Email address:

Please tick the boxes below as appropriate

☒ I consent to my submission being placed on the Independent Taskforce on Workplace Health and Safety website

☐ I would like my name withheld from publication (submissions from individuals only)

Please note that your name and contact information, including any personal information, is being collected so that the Independent Taskforce on Workplace Health and Safety can publish the names of people and organisations who or that made submissions, follow up with a respondent if any submission needs clarification, and for the general purposes of the Strategic Review of the Workplace Health and Safety System. The Independent Taskforce on Workplace Health and Safety is the intended recipient and holder of the information and can be contacted at PO Box 3705, Wellington, New Zealand. In accordance with Privacy Principle 7, you have the right to access and correct any personal information you provide.

Submission template questions

Please answer the following questions and feel free to attach any supporting documents.

If you are completing the template on paper, please feel free to add other pages but make clear which questions your answers refer to. **If you are completing the template electronically** and need more space for any of your answers, please write the rest of your answer into another document, making clear which question your answer refers to, and attach it when you send your completed submission template to us. The answer fields below hold approximately 430 words.

Who gets hurt, killed or suffers from ill-health or disease as a result of work?

1. What do you think is driving the differences in health and safety outcomes for different demographic groups?

As this submission is skin cancer specific my main concern is Outdoor Workers who are at increased risk of skin cancer due to increased exposure to Ultraviolet Radiation (UVR) which is classified as a Class 1 Carcinogen by the International Agency for Research on Cancer (IARC, 2012). UV radiation as a workplace hazard should be treated seriously.

Skin cancer is New Zealand's most common cancer. This isn't reflected in the cancer statistics as most of the approximately 67,000 cases of non melanoma skin cancers (NMSC) are not notified to the Cancer Registry. However Melanoma skin cancers are notified to the Cancer Registry.

New Zealand also has a challenging UV environment.

In New Zealand's summer we have approximately 40% higher levels of UVR than similar latitudes in the northern hemisphere. This is because of:

- The perihelion effect. We are closer to the sun in our summer than countries in the northern hemisphere are in their summer because of the elliptical orbit of the earth around the sun.
- Our clear skies (we have less air pollution than the northern hemisphere)
- Global ozone depletion and since the 1970's there has been about a 10% decrease in the ozone over New Zealand.
- The ozone hole situated well to the south of New Zealand - during its breakup phase in the early summer, pockets of ozone-poor air can drift to New Zealand

We also have a temperate climate – often cool when UV Index high and many fair-skinned people who are more susceptible to skin cancer. Excess exposure to UVR can also cause significant eye problems eg cataract and pterygia formation. Melanoma can also occur in the eye. Sunglasses can protect the eyes.

Ultraviolet radiation (UVR) cannot be seen or felt. What is felt as heat from the sun is caused by infra red heat waves. This means that on cooler, cloudy days from September through to the end of March especially between 10am and 4pm (peak UV times), you can still get sunburnt. Factors such as latitude, ozone, cloud, reflection from surfaces, time of year and time of day determine UV levels.

2. What changes are needed to the workplace health and safety framework to improve outcomes for demographic groups with higher than average rates of injury and illness?

There should be a benchmark standard for workplaces to manage UVR exposure which would incorporate Sun Protection within the PPE (Personal Protective Equipment) framework and within any 'on-the-job' hazard analysis process.

Regulatory framework

3. What do you think the challenges are with the current health and safety regulatory framework?

It appears that self regulation without adequate monitoring or auditing processes is toothless and can lead to a culture of poor workplace safety. Sound leadership at all levels is required eg from Government to workplace management and staff.

It would appear that there is insufficient importance given to minimising occupational harm from UVR in outdoor settings.

Minimising harm from UVR exposure should be a separate part of our current health and safety regulatory framework and not rolled into the 'cancer-causing agents in the workplace' category.

4. How do you think the health and safety regulatory framework could be improved?

The Otago and Southland Division endorses the submission from the Cancer Society National Office which recommends that UVR is listed as a health and safety risk, independent of the general 'cancer causing agents in the workplace' category. Our Division also endorses recommendations made by the Cancer Society Social and Behavioural Research Unit based at the University of Otago and other Cancer Society of New Zealand Divisions that make submissions.

Regulators' roles and responsibilities

5. How effective are the regulators in influencing workplace health and safety outcomes?

It is doubtful that UVR risk is monitored, managed or routinely reported as a workplace health and safety issue. This needs to change.

6. How could the regulators' roles and responsibilities be changed to improve their effectiveness in influencing workplace health and safety outcomes?

Because we cannot rely on individuals or companies to do the right thing, a sound and meaningful regulatory framework is a desirable first step.

New Zealand's changing workforce and work arrangements

7. What impacts are New Zealand's changing workforce and work arrangements having on health and safety outcomes?

Our workforce is aging and UVR risk over the lifespan of outdoor workers will become more evident.

8. What changes to the health and safety framework, if any, are needed as a result of the changing workforce and work arrangements?

More emphasis on sun protection for outdoor workers.

Worker participation and engagement

9. How effective do you think worker participation is in improving workplace health and safety in New Zealand?

In my experience of visiting workplaces with outdoor workers, their knowledge of the properties of ultraviolet radiation and the consequences of over exposure is poor. This needs to be lifted with sustained well resourced programmes that outline practical steps they can take to reduce their risk.

The Health and Safety in Employment Act 1992, says that employers must take all practicable steps to protect their employees health and safety therefore employers have an obligation to protect their employees from skin damage from the sun. Workers have a duty of care to ensure their own health & safety while at work. Workers are also obliged to follow any reasonable instruction as given by their employer, including steps to protect their skin. However this won't be possible if knowledge is poor for both employers and employees.

With a combination of role modelling and effective policies and training, workers can be empowered to participate in safe work practices, including sun protection behaviour to reduce the impact of over exposure to UVR in the outdoor workplace.

10. What improvements can be made to worker participation in workplace health and safety so as to get better workplace health and safety outcomes?

Education about the importance of reducing UVR exposure, consistent management support/role modelling and regulation which explicitly states UVR as a workplace health and safety issue is required.

Education should include an overview of the properties of UVR, risks, what the workplace is doing to protect the worker, what the worker can do to protect themselves and effective use of workplace and personal protective strategies.

Leadership and governance

11. To what extent do directors and other senior leaders provide effective leadership and governance of workplace health and safety?

These staff are crucial to creating safe workplaces and there needs to be very clear expectations of their role. However I would question what their current levels of knowledge are with regard to skin cancer prevention and finding that out is a research priority.

12. What improvements can be made to directors' and other leaders' participation in workplace health and safety, so as to get better workplace health and safety outcomes?

Directors and leaders need to be well informed, understand the risk of UVR in the workplace and that the adoption of sun protection behaviour is a cheap and effective intervention to reduce workplace illness and deaths.

Directors and Leaders need to model appropriate sun protection behaviour.

Capacity and capability of the workplace health and safety system

13. To what extent do firms have the capacity and capability to effectively manage workplace health and safety issues (including through accessing external resources)?

Workplace health and safety must be seen as a worthwhile priority. Safe and well staff are any business or organisation's greatest asset. The steps required to be reduce skin cancer risk are not onerous, are inexpensive and proven. Skin cancer is largely preventable.

Firms of any size, can develop a policy and procedure to reduce exposure to health and safety hazards like UVR. There are resources on the Cancer Society website to assist with this.

14. What options are there for improving firm level capacity and capability to deliver better health and safety outcomes?

Businesses and organisations can bring about change in workplace health and safety. They can identify hazards and risks and make the necessary changes. They can seek feedback and participation from their staff. They can also monitor the health of their employees and make changes as required. This has to be seen as a worthwhile investment of some financial resources, time and energy.

Incentives

15. How effective are existing financial and non-financial incentives in improving workplace health and safety outcomes?

No experience of this.

16. How could incentives be better used to improve workplace health and safety outcomes?

No experience of this.

Influencing health and safety outcomes beyond one's own workplace

17. How successful are government, industry, corporate or other potentially influential bodies in influencing health and safety outcomes beyond their own workplaces (for example through influencing their suppliers, counterparts, and competitors)?

Relevant government ministries, professional associations, industry training organisations and polytechnics etc all have a role to play in influencing health and safety but we have no information on the success or otherwise of this.

18. What could be done to get government, industry, corporate or other potentially influential bodies to exert greater influence on improving workplace health and safety outcomes beyond their own workplaces?

Develop champion roles in a planned and systematic way.

Major hazards

19. How strong is New Zealand's current approach to regulating major hazards?

Given skin cancer is our most common cancer and highly preventable it should have a higher priority.

Hazards that are costly in terms of the healthcare system, time off from work, compensation claims should be prioritised.

20. What improvements to the regulation of major hazards would lead to better health and safety outcomes?

Insufficient knowledge and experience to draw on.

Health and hazardous substances

21. What are the most significant challenges to managing occupational health risks and exposure to hazardous substances?

Lack of an appropriate regulatory framework with sufficient monitoring and auditing.

For UVR risk we see our outdoor workforce as being mostly unaware, complacent and/or indifferent. "Well you have to die of something," was a recent response from a group of builders in Central Otago when asked why they were working without shirts or hats. As I travel frequently in the Otago and Southland region, I rarely see roading workers with appropriate clothing or wide brimmed or bucket hats.

22. What changes could be made to the existing health and safety framework to reduce the harm caused by occupational disease and ill-health?

Any regulatory framework needs appropriate enforcement or it becomes meaningless.

UVR risk should be prioritised in our outdoor workplace and integrated within the existing PPE framework.

All workplaces should follow the Cancer Council Victoria (2007) recommendation's that workplaces:

- Conduct periodic assessments of the UV exposure risk to all workers
- Develop a sun protection policy documenting control measures, that is endorsed by senior management
- Implement a monitoring and review process to determine the effectiveness of control measures and identify changes that may further reduce exposure.

Small to medium-sized enterprises

23. What workplace health and safety challenges are specific to the self-employed and small-to-medium enterprises?

UVR risk is independent of the size of the enterprise. All outdoor workers should be SunSmart at high UVR times.

However, Australian research shows that workers in small workplaces are at higher risk of exposure to UVR and are less likely to be exposed to sun control measures.

24. What improvements could be made to the workplace health and safety framework, and its implementation, to ensure that it's effective for self-employed and small-to-medium sized enterprises?

Ensuring that self-employed and small-to-medium enterprises have clear expectations in terms of health and safety and there are mechanisms to ensure they comply.

Increase access to support to help a smaller workplace meet their health and safety obligations.

Measurement and data

25. To what extent are New Zealand's workplace injury and occupational disease data collection mechanisms conducive to robust monitoring, investigation and comparative analysis?

Others submissions will address this.

26. What opportunities are there for improving data collection, integration and reporting?

Others submissions will address this.

Our national culture and societal expectations

27. Do you think New Zealand culture influences our workplace health and safety outcomes?

Absolutely! I have already alluded to the "She'll be right mate!" attitude.

UVR risk as a largely manageable but frequently overlooked hazard in outdoor workplaces.

As noted earlier the Safer Workplaces Consultation Document, para 306, pg 71 bullet point 4, uses 'Slip, Slop, Slap and Wrap' as a step towards improved safer workplaces. In my experience this is incorrect. A tan is still associated with good health and attractiveness. We also know that men are least likely to take steps to protect their skin.

28. What might we do to improve our culture relating to workplace health and safety?

A social marketing campaign akin to the drink driving one would be beneficial but would require a commitment from central government to fund it. A well planned and thought out social marketing campaign has the ability to influence attitudes and behaviour.

We require an integrated approach combining education, support and role-modelling by management. UVR risk needs to be monitored and safety risks managed.

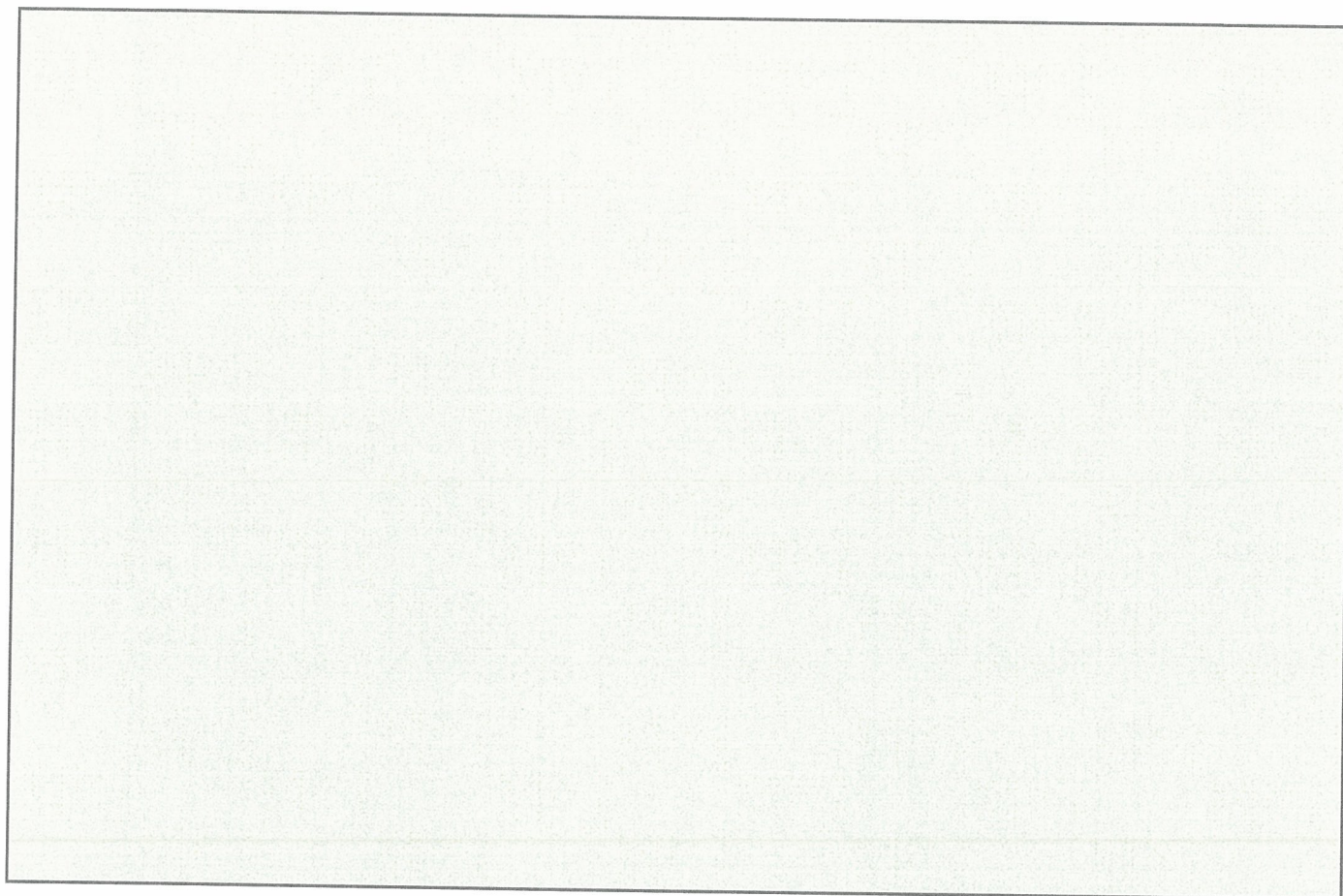
Other factors

29. Are there any other factors (not already covered) that influence workplace health and safety outcomes in New Zealand?

30. Do you have any other suggestions for how to improve workplace health and safety outcomes in New Zealand?

Other comments

31. Are there any other comments that you would like to make?



Please send your completed submission to secretariat@hstaskforce.govt.nz (preferred) or post it to: Submissions, Independent Taskforce on Workplace Health and Safety, PO Box 3705, Wellington 6140. We would appreciate it if you could get your submission to us as early as possible, but at the latest, you must get your submission to us by **5pm, Friday 16 November 2012**. If you are sending your submission to us by mail, you should put it into the post by 5pm, Wednesday 14 November 2012.