

## How to submit this form

# Submission form: Seeking proposals for additions to the list of occupational diseases under the Accident Compensation Act 2001

The Ministry of Business, Innovation and Employment (MBIE) would like your suggested additions to Schedule 2, the list of occupational diseases in the Accident Compensation Act (2001). Please provide your feedback by **5pm, on 17 May 2023**.

When completing this submission form, please provide specific occupational disease names, their relevant exposure, and any data that may aid your submission. Your feedback will help inform decisions about the list of diseases that MBIE will provide to independent researchers and medical experts for their analysis.

We appreciate your time and effort taken to respond to this consultation.

## Instructions

**To make a submission you will need to:**

1. Fill out your name, email address, phone number and organisation.
2. Fill out your responses to the discussion document questions. You can answer any or all of these questions in the **discussion document**. Where possible, please provide us with evidence to support your views. Examples can include references to independent research or facts and figures.
3. If your submission has any confidential information:
  - i. Please state this in the email accompanying your submission, and set out clearly which parts you consider should be withheld and the grounds under the Official Information Act 1982 (Official Information Act) that you believe apply. MBIE will take such objections into account and will consult with submitters when responding to requests under the Official Information Act.
  - ii. Indicate this on the front of your submission (e.g. the first page header may state "In Confidence"). Any confidential information should be clearly marked within the text of your submission (preferably as Microsoft Word comments).
  - iii. Note that submissions are subject to the Official Information Act and may, therefore, be released in part or full. The Privacy Act 1993 also applies.

## How to submit this form

### 4. Submit your feedback:

i. As a Microsoft Word document by email to [ACregs@mbie.govt.nz](mailto:ACregs@mbie.govt.nz) with subject line:  
*Consultation: Suggested additions to Schedule 2*

ii. By mailing your submission to:

The Manager, Accident Compensation Policy  
Ministry of Business, Innovation and Employment  
PO Box 1473

Wellington 6140  
New Zealand

## Submitter information

### Submitter information

MBIE would appreciate if you would provide some information about yourself. If you choose to provide information in the section below it will be used to help MBIE understand the impact of our proposals on different occupational groups. Any information you provide will be stored securely.

#### Your name, email address, phone number and organisation

Name:

Privacy of natural persons

Email address:

[ceo@nzism.org](mailto:ceo@nzism.org)

Phone number:

Privacy of natural persons

Organisation:

The New Zealand Institute of Safety Management (NZISM)

- The Privacy Act 1993 applies to submissions. Please tick the box if you do **not** wish your name or other personal information to be included in any information about submissions that MBIE may publish.
- MBIE may upload submissions or a summary of submissions received to MBIE's website at [www.mbie.govt.nz](http://www.mbie.govt.nz). If you do **not** want your submission or a summary of your submission to be placed on our website, please tick the box and type an explanation below:

I do not want my submission placed on MBIE's website because... [insert reasoning here]

#### Please check if your submission contains confidential information

- I would like my submission (or identifiable parts of my submission) to be kept confidential, and **have stated** my reasons and ground under section 9 of the Official Information Act that I believe apply, for consideration by MBIE.

## Seeking proposals for additions to the list of occupational diseases under the Accident Compensation Act 2001

### Seeking proposals for additions to the list of occupational diseases under the Accident Compensation Act 2001

1. Do you think there is relevant evidence to support including new occupational diseases to Schedule 2 at this time?

Yes       No       Not Sure

2. If yes to Question 1, what occupational diseases should be added to Schedule 2?

Carcinogens, related to exposure to hazardous substances through firefighting. Exposure could be from a one-off incident or multiple exposures. Time limits related to length of service should be removed.

Arsenic: Cancers of the skin, lung, and liver

- Asbestos: Cancers of the lung, larynx, and gastrointestinal tract; mesothelioma
- Benzene: Leukaemia
- Benzo[a]pyrene: Cancers of the lung, bladder, and skin
- 1,3 Butadiene: Blood cancers
- Cadmium: Lung cancer
- Formaldehyde: Nasopharyngeal cancer
- Radioactivity (gamma activity): All cancer sites combined
- Radionuclides (alpha-particle-emitting): All cancer sites combined
- Radionuclides (beta-particle-emitting): All cancer sites combined
- Silica (crystalline): Lung cancer
- Sulfuric acid: Laryngeal cancer
- 2,3,7,8-tetrachloro dibenzo-para-dioxin: Lung cancer, non-Hodgkin lymphoma, sarcoma; all cancer sites combined.

Food manufacturing with fine dust particles ie flour - bakers lung. We understand ACC recognise asthma related issues due to flour, but we suggest that the exposure is broader than asthma alone.

3. For each occupational disease suggested in response to Question 2, what should be listed as the corresponding:
- a. agents, dusts, compounds, substances, radiation or things, and
  - b. if appropriate, the relevant level or extent of exposure to these; or
  - c. occupations, industries, or processes?
4. Do you think there is relevant evidence to support including additional exposures for occupational diseases currently included in Schedule 2?

In a report published in 2010, the International Agency for Research on Cancer (IARC), part of the World Health organization (WHO) has information contained in it relating to firefighters.

2010 Findings from a Study of Cancer among U.S. Fire Fighters (cdc.gov). 2022 •Carcinogenic of occupational exposure as a firefighter; Oncology: Volume 23 Issue 8, Page 985-986 August 2022.

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2023 Exposure to polycyclic aromatic hydrocarbons assessed by biomonitoring of firefighters during fire operations in Germany: International Journal of Hygiene and Environmental Health Volume 248, March 2023

UK research into flour dust links here: [Flour dust: a danger that can't be ignored | Reports | British Baker \(bakeryinfo.co.uk\)](#)

[Flour Dust Exposure Monitoring - Occupational Hygiene Consultants \(occupational-hygiene.co.uk\)](#)

5. If yes to Question 4, for each relevant current occupational disease, what should be listed as the corresponding additional:
- agents, dusts, compounds, substances, radiation or things, and
  - if appropriate, the relevant level or extent of exposure to these; or
  - occupations, industries, or processes?

As per previous comment, exposure as part of the role of a firefighter is so broad, we can't articulate a specific substance or agent. Exposure from firefighting can also occur through hazardous substances being absorbed via the skin.

In terms of flour dust exposure, anyone working with flour is exposed to this risk, covers all food manufacturers.

*If you have suggested including a new occupational disease or diseases, and/or additional exposures, please provide links and/or references to supporting evidence.*

*Where relevant, please include information on how the disease or diseases affect different populations, including impacts on different genders.*

We'd like to highlight that irrespective of the employment type i.e., voluntary, or paid firefighting, the exposure is the same. All those exposed should be covered under the scheme. There are approximately 14,000 voluntary firefighters in New Zealand compared to 8000 employed and all of those firefighters risk exposure to hazardous substances in their role. The fact that the ACC Scheme does not cover these volunteers is abhorrent given the Health and Safety at Work Act treats volunteers the same as employees. We believe that both Acts need to be in alignment with how workers are treated, whether they are voluntary or not, risk of exposure is identical.