# **National Dust Disease Taskforce**

# **Terms of Reference**

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The Australian Government, in response to the emerging trend of new cases of accelerated silicosis, is supporting the development of a national approach to the prevention, early identification, control and management of occupational dust diseases in Australia.

The National Dust Disease Taskforce will inform a national approach by undertaking an independent review of the systems in place to protect Australians who are at risk from occupational dust disease. This will include providing advice on:

1. Actions that have been taken to date to address occupational dust disease across all Australian jurisdictions.

2. Existing policy and regulatory arrangements in Australia to protect those at risk from occupational dust disease, more specifically reviewing what controls are in place; and how these are applied and monitored by the system.

3. Opportunities for improvement across the system to ensure protection of those at risk populations.

4. Options for sustainable approaches for the future prevention, detection and management of occupational dust diseases, including the consideration of the establishment of a National Dust Disease register, including its scope and outcomes to be achieved.

5. Options for potential new research required to support understanding, prevention and treatment of preventable occupational lung disease.

The taskforce will engage with a broad range of stakeholders including key health and medical professionals, relevant state and territory governments and regulators, consumers, industry and workplace health and safety stakeholders, including Safe Work Australia.

The Taskforce will provide interim advice by the end of 2019 to the Hon Greg Hunt, Minister for Health. The Taskforce will provide their final report to COAG Health Council, through the Commonwealth Minister for Health, by no later than December 2020.

## **Membership:**

The taskforce will be initially chaired by the Chief Medical Officer of Australia, and will comprise of no more than six to eight independent experts that would include expertise in the following areas:

• Thoracic and/or respiratory disease with a focus on dust disease;

• Occupational health;

• Public Health/health protection;

• Policy, administration and governance;

• Regulatory practice including standards setting, compliance and enforcement; and

• Industry practice.