

LEAD Action News vol. 16 no. 3, April 2016 ISSN 1324-6012 The newsletter of The LEAD (Lead Education and Abatement Design) Group Inc. PO Box 161 Summer Hill NSW 2130 Australia Ph: (02) 9716 0014, Email <u>www.lead.org.au/cu.html</u> Web: <u>www.lead.org.au/</u>; <u>www.leadsafeworld.com</u>. Editor-in-Chief: Elizabeth O'Brien. Editorial Team: Rocky Huang and Mamun Bhuiyan

## Only 12 weeks to Volcano Art Prize entry deadline!

Please spread the word that the Volcano Art Prize (VAP) 2016 deadline is Monday 25<sup>th</sup> July 2016!! And please enter your own image/slide show/film so you can win a prize! Every VAP entry can potentially be purchased (by anyone) as a Lead Safe World Poster, from <a href="http://www.leadsafeworld.com/shop/">http://www.leadsafeworld.com/shop/</a> so fame and glory also awaits those who enter! Entries are submitted at <a href="http://volcanoartprize.com/submitentry/">http://volcanoartprize.com/submitentry/</a>

## Volcano Art Prize Awards Night 2015

By Elizabeth O'Brien, VAP Founder, pictured at left below.

The Volcano Art Prize (VAP) Awards Night was held in Sydney during International Lead Poisoning Prevention Week of Action, on 26<sup>th</sup> October 2015. You can see all the 2015 VAP entries and previous years VAP entries at <u>http://volcanoartprize.com/vap-archive/</u> (and



you can start voting for the 2016 VAP entries at http://vol canoartpri ze.com/pe opleschoice/). LEAD Group Vice President Michelle Calvert (right) handed

out the Prize Certificates to the Pictureproducts printed mug winners, and the cheque to the overall best artist, Isla MacGregor, (pictured in the middle above).



Entrants in the 2015 Volcano Prize ranged in age from 5 years to 85 years, and included a Kindergarten child and a Professor! Both film entries in 2015 featured a Professor. Entries were received from Canada, United Kingdom, United States and Australia so in 2016 we'd really like to receive entries from many more countries!

# List of Prize Winners as Awarded by the Judge, Artist Anne Roberts, for VAP 2015:



Each artist won a Pictureproducts mug printed with their own entry. Caitlin Ngo also won the People's Choice Cash Prize (as her entry received the most Facebook Likes), and Isla MacGregor won the Judge-awarded Cash Prize and Professor Lanphear's film was highly

commended by the Judge.

Awards Night (L to R): Mark Ju, Caitlin Ngo, Grace Lin, Alice Ju and Liz O'Brien. Photos: Matthew Jensen.

List of VAP 2015 Winners:

> 1. Artist: Alice Ju. Title: Coloured Art. Lead-Safety Message: Lead-aware artists today



can always use lead-free materials. Materials: Non-toxic coloured paper. <u>http://volcanoartprize.com/portfolio-item/coloured-art-2/</u>

- 2. Artist: Alice Ju. Title: Sunflowers. Lead-Safety Message: Grow healthy sunflowers in soil that is not contaminated. Materials: Non-toxic coloured paper. <u>http://volcanoartprize.com/portfolio-item/sunflowers-2/</u>
- 3. Artist: Grace Lin. Title: Phoenix. Lead-Safety Message: Beat lead poisoning and rise like a phoenix. Materials: Non-toxic oil pastels. Age 8. http://volcanoartprize.com/portfolio-item/phoenix/



- 4. Artist: Linda Wang. Title: The Wind, Lead Safety Message: Make what the wind carries beautiful and safe. Materials: Coloured pencils. Age 10. http://volcanoartprize.com/portfolio-item/the-wind/
- 5. Artists: Students of Creative Einstein. Title: Butterflies and Dragonflies. Lead-Safety Message: Lots of creatures want to show their beauty in a non-toxic world. Materials: Transparent paper, coloured with nail polish. Ages 5-12
- 6. Artist: Mark Ju. Title: Still Life Lead-Safety Message: Make sure you eat well. An empty stomach absorbs more lead. Materials: Faber Castell pencils. Age 9. <u>http://volcanoartprize.com/portfolio-item/still-life/</u>
- 7. Artist: Mark Ju. Title: Cat, Elephant, Shrimp, Pig, Penguin, and Cow. Lead-Safe Message: Protect our pets, food animals and wild animals from lead. Materials: Faber Castell pencils Age 9. <u>http://volcanoartprize.com/portfolio-item/elephant-shrimp-pig-penguin-and-cow/</u>
- 8. Artist: Mark Ju. Title: Lemon on a Blue Plate. Lead-Safe Message: Lemon zest and lemon juice are great to get lead out of us Materials: Faber Castell pencils Age 9. <u>http://volcanoartprize.com/portfolio-item/lemon-on-a-blue-plate/</u>
- 9. Artist: Mark Ju. Title: Angel Fish Lead-Safe Message: Be an angel and make sure fish swim in uncontaminated water Materials: Faber Castell pencils Age 9. <u>http://volcanoartprize.com/portfolio-item/angel-fish/</u>
- 10. Artist: Mark Ju. Title: Pumpkin. Lead-Safe Message: Materials: Faber Castell pencils Age 9. <u>http://volcanoartprize.com/portfolio-item/pumpkin/</u>





- 11. Artist: Mark Ju. Title: Carrot, Peas and Butterfly. Lead-Safe Message: Make sure your vegetable gardens have lead free soil. Materials: Faber Castell pencils Age 9. <u>http://volcanoartprize.com/portfolio-item/carrot-peas-and-butterfly/</u>
- 12. Artist: Mark Ju. Title: Watermelon. Lead-Safe Message: Colourful nutrition (Carotenoids) keeps lead away. Materials: Faber Castell pencils Age 9. <u>http://volcanoartprize.com/portfolio-item/watermelon/</u>
- 13. Artist: Mark Ju. Title: Apple. Lead-Safe Message: The pectin fibre in apples sweeps lead out of your body. Materials: Faber Castell pencils Age 9. http://volcanoartprize.com/portfolio-item/apple/
- 14. Artist: Jia Yi Chen. Title: Fish. Lead-Safe Message: Fish need clean water and clean seaweed to be happy. Materials: watercolour. Age 9. http://volcanoartprize.com/portfolio-item/fish/
- 15. Artist: Caitlin Ngo. Title: Fish. Lead-Safe Message: Don't let fish swim in contaminated water. Materials: Watercolour Age 8 (Winner of a mug and the People's Choice Cash Prize). <u>http://volcanoartprize.com/portfolio-item/fish-2/</u>
- 16. Artist: Sophia Liu. Title: Chinese Lanterns. Lead-Safe Message: Chinese Lanterns can have candle wicks with lead in them. Stay lead aware! Materials: Coloured pencils Age 11. <u>http://volcanoartprize.com/portfolio-item/chinese-lanterns/</u>
- 17. Artist: Alessandra Sackey. Title: Harbour Reflections. Lead-Safe Message: Let's keep lead out of Sydney Harbour! Keep our water clean! Materials: watercolour pencils. Age 11. <u>http://volcanoartprize.com/portfolio-item/harbour-reflections/</u>
- 18. Artist: Sue Gee. Title: Macaws. Lead Safe Message: Caged birds are particularly prone to lead poisoning. Materials: Photo. <u>http://volcanoartprize.com/portfolio-item/macaws/</u>
- 19. Artist: Jeanne Grimm. Title: A Lead Safe Future Is In Your Hands. Lead Safe Message: A Lead Safe Future is in your hands. Materials: Edited digital photo. <u>http://volcanoartprize.com/portfolio-item/a-lead-safe-future-is-in-your-hands/</u>
- 20. Artist: Yiru Rocky Huang Title: LEAD Group Office photo. Lead Safe Message: Help The LEAD Group make your life lead-safe by taking on <u>The Blood Lead</u> <u>Challenge!</u> Materials: Olympus E-P2 Digital Camera with Panasonic LUMIX
  20mm f/1.7 II Lens. <u>http://volcanoartprize.com/portfolio-item/1139/</u>
- 21. Artist: Claire O'Brien. Title: Wondai. Lead Safe Message: Got lead? Lead contaminated cows pass on the lead to us. Artist: Oil on canvas. http://volcanoartprize.com/portfolio-item/wondai/
- 22. Artist: John Smith. Title: Leave the colour of the trees. Lead Safe Message: Plants won't grow in highly lead contaminated soil. Materials: Digital image manipulated on Art Flow Software. <u>http://volcanoartprize.com/portfolio-item/leave-the-color-for-the-trees/</u>
- 23. Artist: Louisa Delores (Anderson) Taylor. Title: Lead Safety With Charlie in Mind. Lead Safe Message: "Charlie and the lead factory. Help children like Charlie eat chocolate not lead, test the soil and paint in your home for lead today."



Materials: Felt tip pencils and pastels. <u>http://volcanoartprize.com/portfolio-item/1229/</u>

- 24. Artist: Noela Whitton. Title: Pot Plants. Lead Safe Message: Don't let children or pets eat leaded soil. Materials: Nontoxic water colour on acid free paper. http://volcanoartprize.com/portfolio-item/watercolour-part-1/
- 25. Artist: Meredith Knight. Title: Cat in a box. Lead Safe Message: Lead-safe cats are cute (less aggressive) cats. Materials: Apple iphone6 photo, cropped. <u>http://volcanoartprize.com/portfolio-item/cat-in-a-box/</u>
- 26. Artist: Jordan Fermanis. Title: Lead Contamination Story (Film). Lead Safe Message: Sydney's lead contamination is mainly from leaded fuels and lead paint.

Materials: Sydney Urban Community Garden Footage and Interviews with Elizabeth O'Brien of The LEAD Group and Professor Mark Taylor of The LEAD Group and Macquarie University. <u>http://volcanoartprize.com/portfolioitem/lead-contamination-story-film/</u>

27. Artist: Professor Bruce Lanphear. Title: Little things matter. Lead Safe Message: Low levels of toxics like lead can impact the brain. Materials: professionally produced film.

http://volcanoartprize.com/portfolioitem/little-things-matter/

28.Artist: Isla MacGregor. Title: Entropy 1. Lead Safe Message: Lead kills. (Winner of a mug and of the Judge's Award Cash Prize of \$200).



Mish Calvert & mug winner Grace Lin

http://volcanoartprize.com/portfolio-item/entropy-1/

29. Artist: Richard Jones, Licensed Builder, Kaleidoscope NSW. Title: Ceiling dust removal by Insulvac in Sydney (slide show). Lead-Safety Message: Vacuuming of ceiling dust by an Australian Dust Removalists Association (ADRA) Member Company is a must before ceiling demolition. Materials: Photos taken with Smart phone camera.] <u>http://volcanoartprize.com/portfolio-item/ceiling-dust-removalby-insulvac-in-sydney-slide-show/</u>



Sue Gee, Meredith Knight & Isla MacGregor mug winners

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## Editorial

By Elizabeth O'Brien, Editor-in-Chief, LEAD Action News

The good news is that Volcano Art Prize is open to entries for another 12 weeks, until 25<sup>th</sup> July 2016. Please help make this our biggest competition ever! Your donations can bump up the cash prizes too, but Pictureproducts has kindly donated 30 mugs (printed) again so there are 32 prizes up for grabs.

The best news I've heard in a long time is that three of the final 6 leaded petrol countries have apparently gone unleaded as at the end of January 2016. That means, leaded gasoline is still sold in Algeria, Iraq and Yemen because a US company needs the profits! We've put together a list of some of the top shareholders of Innospec Inc (who make the lead additive for petrol), so that you know which funds and investors to avoid because they hold shares in a company that makes a profit out of a product that keeps 100 million people still exposed (totally preventably) to lead from motor vehicle emissions.

More good news: the world's second largest paint company agreed to phase out lead from all paints by 2020. The media release comes from a hero of The LEAD Group's Technical Advisory Board, Perry Gottesfeld who played a vital role in the decision. And thanks to Linda Parker and Susan Smith from the Pittsburgh Post-Gazette for their kind permission to reprint the Post-Gazette's article about the company, PPG.

In the article *What does WHO and ANZFS say about lead in food?* I trust the reader will see that while the World Health Organisation has said six years ago (in 2010) that there is no level of lead in food that can be regarded as health protective, Australian and New Zealand Food Standards has recently (March 2016) published "revised" metal residue limits for foods - but the maximum amounts for lead in food are unchanged, (except that there is a new limit of 2 milligrams per kilogram (mg/kg) for lead in salt).

Shouldn't the maximum residue limits for lead (and other metals) in Australian foods be revised downwards now that WHO and Australia's National Health and Medical Research Council (NHMRC) have recognised that blood lead levels should be reduced to as low as reasonably achievable, and certainly below the new (NHMRC, May 2015) reference blood lead level of 5 micrograms per decilitre ( $\mu$ g/dL)?



*LEAD Action News* readers will be delighted to hear that the NHMRC has finally published the long-awaited *Managing Individual Exposure to Lead in Australia - A Guide for Health Practitioners*. From memory, there's been talk of publishing this Lead Guide for doctors, etc since 2012! I haven't even had a chance to glance at it yet so I'd be very interested in reader-feedback (letters to the editor) on the NHMRC Lead Guide for case managers, for publication in the next issue of *LEAD Action News*.

President of The LEAD Group, Professor Mark Taylor has co-authored some new publications too, but again I haven't had time to read them so let me know what you think:

Tracing changes in atmospheric sources of lead contamination using lead isotopic compositions in Australian red wine, at: <u>http://www.sciencedirect.com/science/article/pii/S0045653516303319</u> and

*Unravelling a 'miner's myth' that environmental contamination in mining towns is naturally occurring,* at <u>http://www.ncbi.nlm.nih.gov/pubmed/26919836</u>

Michael Galvin from Tasmania has sent in Part 2 of his article of which Part 1 was published in *LEAD Action News vol 16 no 2*. Other heavy metal contamination news from Tasmania has been reprinted here from the *Tasmanian Times* in full with the comments – with acknowledgement of Lindsay Tuffin, Editor.

Thanks kindly to Heath Harrison, Editor, Newcastle Herald, for permission to reprint the Paul Maguire article *Chickens lickin' lead poisoning* and Peter Lewis' *Lead Battery Hens* (hilarious and seriously good) cartoon. I've requested a copy of the Boolaroo Egg Lead study mentioned in The Herald (1994) article from Dr Craig Dalton, Director, Population Health, Hunter New England Local Health District, so hopefully we'll be able to publish the link to it or the full study in the next issue of *LEAD Action News*.

Thanks to our wonderful volunteer translator Orlando Aguirre-Lopez, we have the Spanish version of the Tom Neltner article published in the last issue of *LEAD Action News: Household Action Level for Lead in Drinking Water*.

There's an occupational health submission by Andrew Hobday which is old but we're webpublishing it as it's been taken down from the federal government website; and there's a 2016 occupational lead exposure submission from The LEAD Group to finish.

Finally, I'd like to congratulate our volunteer Data-Analyst Namita Patnaik, on the recent birth of her daughter, and to ask all our readers if they can put their hand up to do the important work that Namita was doing – collating comments I've written about lab lead test results obtained through LEAD Group Kits, as well as to ask if anyone could volunteer their talents at database and website design and building, so we can get the Lead Test Kit



Results website up and running – fully automated and with a much quicker turnaround on results and reports – ASAP!

# ED Action NEWS

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## Q: How many countries still sell leaded petrol / leaded gasoline? A: Three - Algeria, Iraq and Yemen

By Elizabeth O'Brien, Lead Advisor, The LEAD Group Inc

A US doctor working at a US Clinic for Refugees emailed The LEAD Group to ask:

Q: Do Afghanistan, Burma, N Korea, Algeria, Iraq and Yemen still use leaded gasoline? We resettle families from all of these areas and I am interested in learning more about potential exposures.

Here's my answer:

# A: Leaded gasoline is still sold in Algeria, Iraq and Yemen because a US company needs the profits

Dear doctor,

yes, sadly, tragically, the latest information from the United Nations Environment Programme's (UNEP's) Partnership for Cleaner Fuels and Vehicles (PCFV) - of which I am a Partner - is that leaded gasoline is still sold in 3 of these countries, along with unleaded gasoline:- Algeria, Iraq and Yemen. See the map at:

http://www.unep.org/Transport/new/PCFV/pdf/Maps\_Matrices/world/lead/MapWorld Lead\_January2016.pdf - which is accessible via http://www.unep.org/transport/new/pcfv/

Worse still, up until 27 January 2016, that page

(http://www.unep.org/transport/new/pcfv/) linked to a World Map showing 6 countries still selling leaded petrol as at April 2014 - which not only shows that leaded and unleaded gasoline were available in Algeria, Iraq and Yemen, but also shows that ONLY leaded gasoline was available in Afghanistan, Myanmar and North Korea (presumably up to the end of January 2016).

The PCFV website noted at the time, in *The Lead Campaign* - linking to the 2014 World Map (undated but probably written in April 2014):

"Today only 6 countries still use leaded petrol, versus the 82 countries that were leaded when the PCFV was formed in 2002. The PCFV supports programs in these 6 remaining countries, ensuring that a global elimination is within reach."



The original UNEP PCFV target date for the total elimination of leaded gasoline globally was 2008, according to the PCFV booklet *Target 2008- Global Elimination of Leaded Petrol -* published early 2008.

So, being half-way through the final 6 leaded gasoline countries nearly 8 years on, is not something the US-incorporated UK-manufacturing lead additive manufacturer can be proud of, and certainly, I am ashamed to be a

Partner of a UN Partnership (which includes the US EPA) which appears to

wield such little influence over a US company (Innospec).

These 6 countries were the last-remaining leaded gasoline selling countries also as at January 2012 and January 2011, so, in other words, every other country in the world went unleaded more than FIVE years before these final customers of "responsible tetraethyl lead supply". In the three years since January 2008 in fact, 10 other countries finally went unleaded.

The best effort I ever made to get Innospec to stop making the lead gasoline additive (tetraethyl lead or TEL for short) was to complain about the company to the OECD. In the resulting statement of Innospec's refusal to engage in negotiations on the matter with my charity (The LEAD Group), Innospec stated that they had "never supplied TEL to Afghanistan, North Korea or Burma", which I took to mean that they admitted they were supplying TEL to Algeria, Iraq and Yemen (as we had claimed in our complaint, based on the UNEP PCFV information and the fact that Innospec stated on their website that they were the only manufacturer of TEL in the world). Today, still states:

"Octane Additives

Responsible tetraethyl lead supply and stewardship

Our Octane Additives business is the world's only manufacturer of tetraethyl lead (TEL) products."

[URL: http://www.innospecinc.com/our-markets/octane-additives/octane-additives]

Innospec's Annual Report (for 2015 calendar year) states:

"Decline in our TEL business

The remaining sales of the Octane Additives business are now concentrated to one remaining customer. When this customer chooses to cease using TEL as an octane enhancer then the Company's future operating income and cash flows from operating activities would be materially impacted."



#### [URL:

http://www.envisionreports.com/IOSP/2016/14222JA16E/default.htm#p=1&c=0&v=1?vo ting=false ]

Have the words "responsible" and "stewardship" ever been so misused as in the phrase: "**Responsible** tetraethyl lead supply and **stewardship**"?

Thus, I am encouraged by the January 2016 PCFV "WORLD MAP: Leaded Petrol Phaseout: Global Status January 2016" [showing 3 countries where leaded gasoline is still used for road vehicles; Dual (leaded and unleaded) Countries: Iraq, Algeria, Yemen] to approach Innospec again, and I would encourage you to also write to them (and to your federal environment minister and congressional representative) with your concerns about the likely lead exposure of the refugees (and long-term costs to the US health and education and criminal justice systems) coming from those countries to the USA.

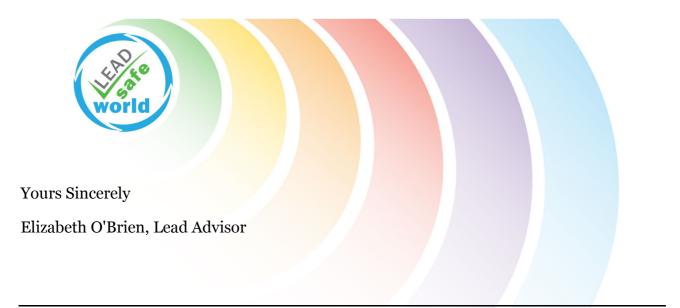
To write to Innospec you can "Send Message" to:

Innospec Fuel Specialties LLC 8310 South Valley Highway Suite 350 Englewood Colorado 80112 USA Tel: +1 303 792 5554

via the Colorado tab on the map at http://www.innospecinc.com/get-in-touch

Such refugees (of all ages) require blood lead monitoring and blood pressure monitoring from the moment they arrive in the USA, and then periodically until their blood lead levels fall at least below 5 micrograms per decilitre, in order to give them some hope of having a healthy brain and non-elevated blood pressure for the rest of their lives. This monitoring should identify those refugees who had lead exposure from, for instance, roadside sales of leaded gasoline, siphoning of leaded gasoline from containers into vehicle fuel tanks, (gasoline service stations are not common in these countries) breathing the air around dense traffic, as well as all the other usual lead sources such as shooting leaded ammunition and living near or working in lead mines, smelters, lead acid battery recycling operations (which often are small-scale and involve collection of batteries by children and breaking of batteries and melting of the lead in homes or residential yards or on the footpath) or metal scrap recycling/car recycling/e-waste recycling (also often done by children).

All the best in your important work. I'm very happy to web-publish cases or blood lead or blood pressure results from your Refugee clinic if you'd like to supply them.



# Countries where Leaded Petrol is Possibly Still Sold for Road Use As at 28<sup>th</sup> April 2016

Compiled by Robert Taylor, Researcher; Graph created by Ardhika Wira, Administrator; Updated (2011) by Zac Gethin-Damon, Administrator, and (2016) Mamun Bhuiyan, Editor; The LEAD Group

## BY REGION

#### Africa

Algeria

#### Middle East

Iraq

Yemen

#### IN ALPHABETICAL ORDER

Algeria

Iraq

Yemen

#### IN POPULATION ORDER

- 39,542,166 Algeria
- 33,420,000 Iraq

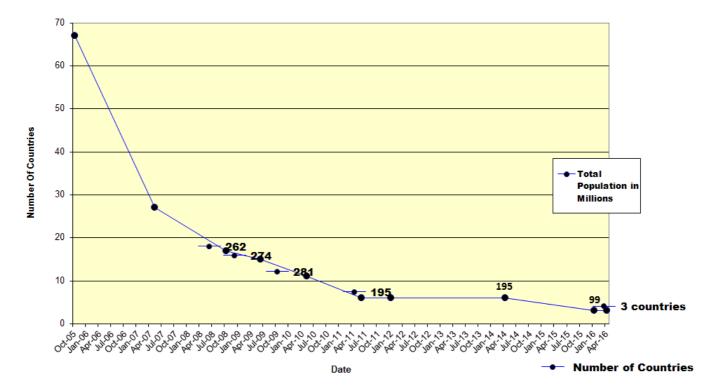
26,737,317 Yemen

### 99,699,483

## TOTAL POPULATION DIRECTLY AFFECTED



Total Population (in Millions) In Number Of Countries Still Selling Leaded Petrol, By Date



#### **REFERENCES:**

**CIA** (Central Intelligence Agency), USA (2008) Country Population data downloaded from <a href="https://www.cia.gov/library/publications/resources/the-world-factbook/">https://www.cia.gov/library/publications/resources/the-world-factbook/</a> (Accessed 28th April 2016)

**PCFV** (Partnership for Cleaner Fuels and Vehicles), **UNEP** (United Nations Environment Programme) Leaded Petrol Phase-out: Global Status January 2016 <u>http://www.unep.org/Transport/new/PCFV/pdf/Maps\_Matrices/world/lead/MapWorldLead\_January2016.pdf</u>; ACCESSIBLE VIA <u>http://www.unep.org/transport/new/pcfv/</u>

## **Innospec shareholders**

Information collated by Mamun Bhuiyan, The LEAD Group Inc. Reference: http://investors.morningstar.com/ownership/shareholders-major.html?t=IOSP

The Company operates and raises profit for the shareholders in three segments: Fuel Specialties, Performance Chemicals and Octane Additives. The Company's products are sold to oil and gas exploration and production companies, oil refineries, personal care and fragrance companies, and other chemical and industrial companies. The Fuel Specialties segment develops, manufactures, blends, markets and supplies a range of specialty chemical products used as additives to a range of fuels. The Octane Additives segment produces **tetra ethyl lead** (TEL) and consists of sales of TEL for use in automotive gasoline. *"Innospec Shareholders Equity"* jumped more than double in five years period from US\$300.7m in (yr-2010) to US\$605.3m in (yr-2015).

The major shareholders of Innospec are: <u>T. Rowe Price Small-Cap Value</u>, Champlain Small Company Fund, Fidelity® Low-Priced Stock, Vanguard Total Stock Mkt Idx, American Century Small Cap Value Inv, Champlain Small Company Adv, Fidelity Advisor® Small Cap A, iShares S&P Small-Cap 600 Growth, James Balanced: Golden Rainbow R, Old Westbury Small & Mid Cap, Royce Total Return Invmt, DFA US Targeted Value, Wells Fargo Special Small Cap Value A.

The success the company achieved can be attributed to three basic factors: strategically exploiting the technology... [though apparently not the technology to make the proven non-lead alternative petrol octane additive products which are currently in use in every other country in the world apart



from Innospec's end customer countries: Algeria, Iraq and Yemen.]

GRAPHIC: Volcano Art Prize (VAP) Entry 2014. Artist: Monica Erosa. Title: Awareness. Lead-safety Message: Release your mind from limited beliefs and let spirit be free. Free to create and manifest anything - even a lead-safe world. Order this as a Lead Safe World Poster here by copying and pasting this URL into the Order Notes section at Checkout:

http://volcanoartprize.com/portfolioitem/awareness/



## Victory! The second largest paint company in the world will stop making lead paint by 2020

Media release:

- On April 21, 2016, PPG, the second largest paint company in the world, announced that they were going to stop making lead paint by 2020. The announcement was made in response to a question from Perry Gottesfeld, Executive Director of Occupational Knowledge International (<u>www.okInternational.org</u>), who attended the PPG annual shareholder meeting to present a petition signed by over 5,700 people asking them to stop making lead paint. OK International had been repeatedly asked the company to remove lead additives from its products over the last four years.
- "This was a big win to protect public health around the world and now we hope that other U.S. paint companies will follow PPG's leadership." Gottesfeld said. Sherwin Williams and Valspar have refused to stop making lead paint and so we are asking you to sign the petition at this link:

https://www.change.org/p/stop-making-lead-paint-and-poisoning-people-around-theworld

There was also this story:

#### **Paint giant PPG announces it will phase lead out of its products by 2020** By Rachel Dissell, Brie Zeltner, The Plain Dealer

on April 22, 2016 at 12:34 PM, updated April 22, 2016 at 12:49 PM http://www.cleveland.com/healthfit/index.ssf/2016/04/paint\_giant\_ppg\_announces\_ \_\_phas.html

Contact:

Perry Gottesfeld Executive Director OK International 4444 Geary Boulevard, Suite 208 San Francisco, CA 94118 USA +1 415-221-8900 <u>www.okinternational.org</u> Follow us on Twitter at: <u>http://twitter.com/occupknowledge</u>

# PPG Industries will phase out lead from all paints by 2020

April 21, 2016 1:35 PM, by Joyce Gannon, Pittsburgh Post-Gazette. Copyright ©, Pittsburgh Post-Gazette, 2016, all rights reserved. Reprinted with permission.

PPG Industries today said it will phase out lead from all of its paints by 2020.



Michael McGarry, president and chief executive of the Downtown-based coatings and glass company, told shareholders at the company's annual meeting that PPG's sustainability committee adopted the new policy to reduce and eventually eliminate lead from its industrial paints that are used for automobiles, heavy equipment, bridges, airplanes and other applications.

Exposure to lead-based paint is known to cause severe health issues in children and adults including damage to body organs, behavioral problems, and impairments to mental and physical development.

PPG eliminated lead from its household paints several years ago.

During the annual meeting at the Fairmont Hotel, Downtown, Perry Gottesfeld, executive director of a San Francisco, Calif.-based activist organization, Occupational Knowledge International, asked the company to stop making and distributing lead paint and presented a petition signed by more than 5,700 people.

The same petition was delivered to coatings giant Sherwin-Williams which is based in Cleveland, Ohio. In it, petitioners asked the companies to eliminate all lead compounds in their products, recall all lead paint and dispose of it through environmentally safe methods.

Mr. Gottesfeld noted that Dutch paints maker AkzoNobel stopped using lead additives in 2011.

In a new sustainability report posted on its company web site today at <u>www.ppg.com</u>, PPG said it has no plans to develop new products that contain lead and has developed plans to eliminate lead from products that become part of its portfolio through acquisitions.

Mr. McGarry said PPG is working with existing customers that use its industrial paints to reformulate products for their specifications.

"This is a big reversal," said Mr. Gottesfeld, who noted that his organization had made several earlier attempts to push PPG to make lead-free products. "I think it's an excellent move."



Earlier today, PPG said first-quarter net income rose nearly 8 percent to \$347 million, or \$1.29 per share, boosted by income from six acquisitions in 2015 and cost-cutting initiatives.

Sales were flat compared with a year ago at \$3.7 billion.

Adjusted net income, excluding after-tax transaction charges, was \$351 million, or \$1.31 per share, beating Wall Street analysts' average estimate of \$1.30 per share.

Adjusted earnings were up 11 percent over first-quarter 2015.

"We realized this improvement despite ongoing, but moderating, unfavorable foreign currency translation," said Mr. McGarry.

He said sales volumes improved in Europe, China and Mexico while U.S. and Canadian sales were flat.

Within its business segments, PPG said sales of performance coatings -- which includes consumer paints -- fell less than 1 percent. Industrial coatings rose by about 2 percent.

Glass sales declined by 2 percent in part because of the sale of a glass manufacturing plant.

Company officials were scheduled to discuss the quarterly results in a conference call this afternoon.

## What does WHO and ANZFS say about lead in food?

Information collated by Elizabeth O'Brien, The LEAD Group

## The World Health Organization (WHO)

The Joint Expert Committee on Food Additives (JECFA) [of the World Health Organization (WHO)] 73rd meeting Summary & Conclusions re Lead & Cadmium 24/6/10 states: "Based on the dose-response analyses, the Committee estimated that the previously established PTWI [Provisional Tolerable Weekly Intake] of 25 µg/kg body weight [25 micrograms of lead per kilogram of body weight] is associated with a decrease of at least 3 intelligence quotient (IQ) points in children and an increase in systolic blood pressure of approximately 3 mmHg (0.4 kPa) in adults. While such effects may be insignificant at the individual level, these changes are important when viewed as a shift in the distribution of IQ or blood pressure within a population. The Committee concluded that the PTWI could no longer be considered health protective, and it was withdrawn. Because the analyses do not indicate a threshold for the key effects of lead, the Committee concluded that it was not possible to establish a new PTWI that would be considered health protective. The Committee stressed that these estimates are based on dietary exposure (mainly food) and that other sources of exposure to lead also need to be considered." [Ref: http://apps.who.int/food-additives-contaminants-jecfa-database/chemical.aspx?chemID=3511 ]

## Australian and New Zealand Food Standards (ANZFS)

The following TABLE has yellow highlights showing recent changes and draws on information from:

#### **Annotated References:**

The maximum levels in effect from 1 March 2016 are listed in:

Ref: Australian and New Zealand Food Standards Code – Schedule 19 – Maximum Levels of Metal Contaminants – In Effect as at 1<sup>st</sup> March 2016. https://www.legislation.gov.au/Details/F2016C00197

Note: As = Arsenic, Cd = Cadmium, Pb = Lead, Hg = Mercury, Sn = Tin

Ref: Attachment A - Approved draft variations to the Australia New Zealand Food Standards Code. Food Standards Australia New Zealand Act 1991 - As in effect on 1 March 2016. <u>https://www.foodstandards.gov.au/</u>

Note: Many food sources and additives have specific arsenic and heavy metal limits (not listed here) in the above reference, and it contains the following maximum limits:

S3-4 Additional and supplementary requirements

If there is no relevant specification under section S3—2 or S3—3, or if the monographs referred to in those sections do not contain a specification for identity and purity of a substance relating to arsenic or heavy metals, the specification is that the substance must not contain on a dry weight basis more than:

(a) 2 mg/kg of lead; or



(d) 1 mg/kg of mercury.

The maximum levels in foods prior to 1 March 2016 are listed in:

Ref: STANDARD 1.4.1- CONTAMINANTS AND NATURAL TOXICANTS. Legislative Instrument Compilation and Supplementary Material AMENDMENT OF THE AUSTRALIA NEW ZEALAND FOOD STANDARDS CODE (In force from 15/1/15, ceased 1/3/16). <u>https://www.legislation.gov.au/Details/F2015C00052/Download</u>

The maximum level (in mg/kg) for a particular food is listed in relation to that food:

#### TABLE: Maximum levels of metal contaminants permitted in Australian foods

Contaminant	Food	Maximum	Maximum level
		level in effect	
		1 March 2016	1 March 2016
Arsenic (total)	Cereal grains and milled cereal products (as	1	1 [Cereals]
	specified in Schedule 22)		
	Salt	<mark>0.5</mark>	[not listed]
Arsenic (inorganic)	Crustacea	2	2
	Fish	2	2
	Molluscs	1	1
	Seaweed	1	1
Cadmium	Chocolate and cocoa products	0.5	0.5
	Kidney of cattle, sheep and pig	2.5	2.5
	Leafy vegetables (as specified in Schedule 22)	0.1	0.1 [Schedule 4 to Standard 1.4.2]
	Liver of cattle, sheep and pig	1.25	1.25
	Meat of cattle, sheep and pig (excluding offal)	0.05	0.05
	Molluscs (excluding dredge/bluff oysters and	2	2
	queen scallops)		
	Peanuts	0.5	0.5
	Rice	0.1	0.1
	Root and tuber vegetables (as specified in Schedule	0.1	0.1 [Schedule 4 to Standard 1.4.2]
	22) Salt	0.5	[not listed]
	Wheat	0.1	0.1
Lead	Brassicas	0.3	0.3
	Cereals, pulses and legumes	0.2	0.2
	Edible offal of cattle, sheep, pig and poultry	0.5	0.5
	Fish	0.5	0.5
	Fruit	0.1	0.1
	Infant formula products	0.02	0.02
Lead	Meat of cattle, sheep, pig and poultry (excluding	0.1	0.1
	offal)		
	Molluscs	2 <mark>2</mark>	2
	<mark>Salt</mark>	<mark>2</mark>	[not listed]
	Vegetables (except brassicas)	0.1	0.1
Mercury	Crustacea		mean level of 0.5*
	Fish (as specified in Schedule 4 to Standard 1.4.2)		
	and fish products, excluding gemfish, billfish		mean level of 0.5*
	(including marlin), southern bluefin tuna,		
	barramundi, ling, orange roughy, rays and all		mean level of 1*
	species of shark		
	Gemfish, billfish (including marlin), southern		
	bluefin tuna, barramundi, ling, orange roughy, rays		

WO			
Contaminant	Food	Maximum level in effect 1 March 2016	Maximum level in effect prior to 1 March 2016
	and all species of shark Fish for which insufficient samples are available to		1
	analyse in accordance with clause 6 Molluscs		mean level of 0.5*
	Fish, crustacea and molluscs		
	Salt	See S19—7	[see above]
	Sait	<mark>0.1</mark>	[not listed]
Tin	All canned foods	250	250

## Australian federal and state and territory responses to lead exposure cases

By Elizabeth O'Brien, Lead Advisor at The LEAD Group Inc, April 2016.

#### New (federal) NHMRC Lead Guide for Health Practitioners

On 27<sup>th</sup> April 2016, the Australian federal Health Department's National Health and Medical Research Council (NHMRC) published *Managing Individual Exposure to Lead in Australia - A Guide for Health Practitioners*, at <u>https://www.nhmrc.gov.au/ files nhmrc/file/publications/16200 nhmrc managing</u> <u>individual exposure to lead in australia web.pdf</u>; PDF (AT BOTTOM OF PAGE) ACCESSIBLE VIA: https://www.nhmrc.gov.au/guidelines-publications/eh58</u>

The Lead Project Team at the NHMRC advised me by email (mid-April 2016):

- The Guide, *Managing individual exposure to lead in Australia a guide for health practitioners* is a companion document to the Statement and Information paper: evidence on the health effects of lead. It aims to provide general information on the detection and management of individuals with elevated blood lead levels in non-endemic areas from which State and Territory health authorities can develop specific advice for health practitioners, including clinicians and environmental health officers.
- The management of exposure in communities where lead is endemic (such as lead mining and smelting communities) is the responsibility of State/Territory health authorities who run tailored programs to address local needs. If you receive enquiries from individuals living in these areas I suggest you refer them to their local state/territory health authority.



- The publication of the Guide on the NHMRC website will also be advertised in the NHMRC Health Tracker newsletter, which is a free monthly e-newsletter. Details of how to subscribe are available at: <u>https://www.nhmrc.gov.au/media/newsletters/health-tracker</u>
- The NHMRC's Lead Working Committee concluded on 30 November 2015 and it fulfilled its Terms of Reference. Details of its terms of reference and membership are available at:
- $\frac{https://www.nhmrc.gov.au/health-topics/review-lead-exposure-and-health-effects-australia/nhmrc-lead-working-committee-2012-20$

[end of NHMRC Lead Project Team email]

- Prior to the NHMRC Lead Guide being published, I web-searched or surveyed each State and Territory Public Health section in order to ask whether they'd incorporated into policy, the May 2015 NHMRC recommendation:
- "If a person has a blood lead level greater than 5 micrograms per decilitre, their exposure to lead should be investigated and reduced." Reference: <u>https://www.nhmrc.gov.au/ files nhmrc/publications/attachments/eh58a informat</u> <u>ion paper effects lead human health a.pdf</u>
- That is, the NHMRC was recommending Public Health action to be taken in every case where a blood lead level exceeds 5 micrograms per decilitre ( $\mu$ g/dL). Since 1993, the blood lead "action" level had been 10  $\mu$ g/dL. Here are the results of the survey:

#### Queensland

- On 17th July 2014, Queensland became the first Australian state to announce the proposed halving of the blood lead notification level, in media release which included:
- "Chief Health Officer Dr Jeannette Young said Health Minister Lawrence Springborg had advised the Government would accept a recommendation from her to reduce the current mandatory blood lead notification level from 10 micrograms per decilitre (ug/dL) to 5 ug/dL...
- "Dr Young said the 5 ug/dL blood lead level was adopted in 2012 by the United States under advice from that country's Centres for Disease Control and Prevention." Reference: <u>https://www.health.qld.gov.au/news-alerts/doh-media-</u> <u>releases/releases/140717-lead-levels.asp</u>

Queensland's Health Legislation Amendment Regulation (No. 3) 2015 notes:

Part 6 of the Regulation commences on 1 January 2016.

#### Part 6 Amendment of Public Health Regulation 2005



#### ...Amendment of sch 1 (Notifiable conditions)

*Clause 19* amends schedule 1 'Notifiable conditions', to ensure that all condition names and case definitions are consistent with contemporary terminology.

#### **Blood lead level**

- The Regulation will amend schedule 1 of the Public Health Regulation to change the notification level for lead exposure, blood lead level, from 10 ug/dL (0.48umol/L) to 5 ug/dL (0.24umol/L) or more, to allow greater identification, management, reduction and if possible, elimination of lead exposure sources.
- ...the *Public Health Regulation 2005* (Public Health Regulation) to:
- ...allow greater identification, management, reduction and if possible, elimination of lead exposure sources, by identifying persons who have lead exposure with blood lead levels of  $5 \mu g/dL$  or more,
- ...An amendment to the Public Health Regulation is required to change the notification level for lead exposure (blood lead levels) from 10 ug/dL (0.48umol/L) to 5 ug/dL (0.24umol/L) or more. As a result of this revision, laboratories will be required to notify results that indicate a blood lead level of 5 ug/dL (0.24umol/L) and above.
- "The objective of the intervention is to identify persons who have lead exposure higher than background levels to allow greater identification, management, reduction and if possible, elimination of lead exposure sources. This will ensure that potential adverse health effects are better managed." Reference: <u>https://www.legislation.qld.gov.au/LEGISLTN/SLS/RIS\_EN/2015/15SL154E.pdf</u>

#### Australian Capital Territory (ACT)

Emailed response:

Thank you for your enquiry.

Elevated blood lead levels are not notifiable in the Australian Capital Territory (ACT). The Environmental Health unit within the ACT's Health Protection Service works closely with clinicians to investigate any referred cases with elevated lead levels as warranted. In the event that we became aware of cases of elevated blood lead levels, a public health investigation would be initiated and we would utilise the NSW Health Guidelines for lead poisoning which can be found here:

<u>http://www.health.nsw.gov.au/factsheets/guideline/lead.html</u> [*Editor's note:* this URL is broken and there are no Lead fact sheets on the NSW Health Department website, but perhaps the NSW Environment Protection Authority (EPA) fact sheets at <u>http://www.epa.nsw.gov.au/mao/leadbasedpaint.htm</u> - which links to http://www.epa.nsw.gov.au/resources/epa/140693-lead-your-health-fact-sheet.pdf - are utilised in the ACT... or they will soon utilise the guidance mentioned below, at <a href="http://www.health.nsw.gov.au/Infectious/controlguideline/Pages/lead.aspx">http://www.health.nsw.gov.au/resources/epa/140693-lead-your-health-fact-sheet.pdf</a> - are utilised in the ACT... or they will soon utilise the guidance mentioned below, at <a href="http://www.health.nsw.gov.au/Infectious/controlguideline/Pages/lead.aspx">http://www.health.nsw.gov.au/Infectious/controlguideline/Pages/lead.aspx</a> ]

- ACT pathology refers blood lead level testing to QML pathology in Queensland. The pathology testing reports lead levels to as low as <2 micrograms/dL, with levels of 5 micrograms/dl or greater identified as elevated.
- There are no identified areas of high risk of lead exposure in the ACT, with most cases being related to occupational exposure.

I hope this information is of use to you and answers your query.

#### Health Protection Service, Population Health, ACT Health

#### Victoria

After receiving no response to my email, I phoned and was advised that: From 4<sup>th</sup> April 2016 the notifiable blood lead level in Victoria will be 5 ug/dL or greater. A later websearch revealed:

#### **Chief Health Officer Advisory**

#### 02 March 2016

- "From 4 April 2016 doctors and laboratories are required to notify the Department of Health and Human Services (DHHS) of:
- "• all **blood lead level** test results **greater than 5 micrograms per decilitre** (replacing the current threshold of 10 micrograms per decilitre). *You must provide notification to the DHHS in writing within five days of diagnosis.*"
- Reference: https://www2.health.vic.gov.au/Api/downloadmedia/%7BB33DCBD5-6FE4-44C2-AD42-98C64B48DD96%7D

#### Tasmania

Having received no response to my phone message, my websearch revealed no change to the Tasmanian guidelines which lists the following as a notifiable condition:

Lead [Demonstration of blood level in excess of 10 µg/dL (0.48 µmol/L) in any person not known to be occupationally exposed to lead], with PERSON OR ORGANISATION REQUIRED TO NOTIFY: Laboratory. Reference: *Guidelines for Notification of Notifiable Diseases, Human Pathogenic Organisms and Contaminants, Public Health Act 1997.* Issued 1 February 2010, at https://ablis.business.gov.au/TAS/resource/COP7953.pdf

#### South Australia

Emailed letter:

Thank you for your email of 19 February, 2016 regarding blood lead test notifications. As this matter falls within my portfolio of responsibilities, the Chief Executive has asked me to respond to you on his behalf.

There is no legal requirement for notification of blood lead test results in South Australia. SA Health's lead abatement policies and programs have always aligned to, and reported against, the NHMRC guidelines. Further details of how NHMRC guidelines are implemented in the Port Pirie Lead Implementation Program can be found here:

http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/pr otecting+public+health/drugs+poisons+chemicals+and+contaminants/port+pirie+le ad+implementation+program/port+pirie+lead+implementation+program

Doctors or members of the public who require aid in identifying sources of lead exposure are encouraged to contact SA Health for advice and resources for exposure investigations. Resources are also available on the SA Health web site at:

Thank you for your interest in this matter.

Yours sincerely

Public Health Services, Public Health & Clinical Systems, SA Health, Government of South Australia

#### Western Australia (WA)

- I emailed the Health Department in Western Australia and then they phoned in mid-March 2016 to report progress in answering my questions, which were:
- I am aware that WA Health follows up and investigates children under 5 yrs who have PbBs of 5 ug/dL or more so I'm really asking how do you know when a young child has an EBLL? How are you notified or more specifically, is any category of person required under your public health regulations to notify the Department? Do you also receive notifications for older people and do you also investigate those older children and adults if the blood lead level is above 5 or above 10 ug/dL or does the GP still have to notify the Department that a patient is "lead poisoned" by diagnosis, as in the old days?



- On the same day as the phonecall in mid-March 2016, I received the following excellent news by email:
- ...as discussed by phone today we have been sorting out the processes required to be able to update our lead notification system.
- The Health Act does currently list lead as a notifiable disease. I can confirm that the Department of Health will be moving towards incorporating a blood lead level of of greater than or equal to 5 micrograms/decilitre for the general population (excluding occupational testing) as notifiable.

The link to the NSW Health's recent changes is:

http://www.health.nsw.gov.au/Infectious/controlguideline/Pages/lead.aspx or http://www.health.nsw.gov.au/Infectious/controlguideline/Documents/lead-inblood.pdf

#### Cheers

# ENVIRONMENTAL HEALTH DIRECTORATE, PUBLIC HEALTH DIVISION, DEPARTMENT OF HEALTH

#### New South Wales (NSW)

As noted above, NSW Health published *Lead in Blood: Control Guideline for Public Health Units*, on 22 February 2016 <u>http://www.health.nsw.gov.au/Infectious/controlguideline/Pages/lead.aspx</u> or <u>http://www.health.nsw.gov.au/Infectious/controlguideline/Documents/lead-inblood.pdf</u> (last updated on Tuesday 5 April 2016) and it has the most useful Public Health follow-up guidance I've ever found in Australia so I've pasted quite a bit of it below:

#### Managing single notifications

Response time

#### Investigation

Within 3 working days of notification of a confirmed case, begin follow-up investigation.

#### Data entry

Within 5 working days of notification enter confirmed cases on NCIMS.

#### **Response procedure**



- The response to a notification should be carried out in collaboration with the case's health carers and/or SafeWork NSW. Regardless of who does the follow-up, PHU staff should ensure that action has been taken to:
- Confirm any symptoms associated with exposure, including onset date
- Confirm whether the case or relevant care-giver has been provided with the results before beginning the interview

Seek the doctor's permission to contact the case or relevant care-giver

#### **Review case management**

Identify household contacts who may also be at risk of elevated blood lead levels

#### Response protocol for single elevated blood lead level notifications in non-endemic areas

- [For endemic areas, refer to existing local protocols and programs for managing lead notifications in children].
- The protocol outline below is for new notifications. If the notification relates to follow up from a previous notified blood lead level within the last 12 months (BLL), the PHU response can be modified according to the circumstances of the case.

#### Table 1. New Lead Notifications Procedure

Level Blood lead level		Age	PHU Response
			<b>Information:</b> Consult treating doctor. Standard letter to case's parent/guardian and NSW Health's factsheet 'Lead exposure in children'
1	Greater or equal to 5but less than 10 µg/dL( ≥0.24-<0.48 µmol/L)	Under g years	<b>Risk management:</b> If requested by the doctor or 5 the family offer counselling on risk reduction/contact management to case parents/guardians.
			<b>Blood tests:</b> Household members may need to be tested particularly young children and pregnant women.
		5 years and above	<b>Information:</b> Consult treating doctor. Standard, letter to case's parent/guardian and NSW Health's factsheet 'Lead exposure in children'.
			Risk management: Not routine. At the discretion



of the PHU.

**Blood tests:** Household members may need to be tested particularly young children and pregnant women.

**Information:** Consult treating doctor. Standard letter to case.s parent/guardian and NSW Health's factsheet 'Lead exposure in children'

Greater or equal to 10 but less than 25  $\mu$ g/dL(  $\geq$ 0.48-<1.2 $\mu$ mol/L)

2

**Risk management:** Offer counselling/home risk Under 5 assessment to case's parents/guardians as years appropriate.

**Blood tests:** Household members may need to be tested particularly young children and pregnant women. Retest BLL after 6 months or earlier if clinically indicated.

**Information:** Consult treating doctor. Standard letter to case.

If non occupational exposure provide lead factsheet on risk identification and management to requesting doctor or case as appropriate.

5 years and a bove Work related exposures: Suggest case or treating doctor advice patient to discuss BLL with employer in the case of occupational exposure. Inform SafeWork in case of cluster of cases.

**Risk management:** Offer counselling/home risk assessment to case as appropriate.

**Blood tests:** Household contacts may need to be tested particularly young children and pregnant women.

As for level 2, plus

Greater or equal to 25

Under 5 **Environmental assessment:** Conduct years preliminary environmental assessment, including home visit, exposure pathways and sampling if source not obvious.



**Expert** advice: Seek expert advice from clinical toxicologist for future BLL retesting

As for Level 2, plus

Environmental assessment: Conduct preliminary environmental assessment, including 5 years home visit, exposure pathways and sampling if source not obvious.

and above

Work related exposures: Strongly suggest case or treating doctor consult SafeWork NSW for further advice on occupational exposure, if appropriate.

As for level 3, plus

**Medical treatment:** If BLL of or above  $45 \,\mu g/dL$  $(2.17 \,\mu mol/L)$  in a child ensure treating doctor is aware of result when received as BLL at these levels All ages may require urgent medical treatment (chelation).

> **Medical treatment:** If BLL above 70 µg/dL (3.37µmol/L) requesting doctor is aware of the result as BLL at these levels in an adult may require urgent medical treatment (including chelation).

#### Management

4

#### a. Investigation and Treatment of Cases

The main treatment for adults and children involves:

Reducing or preventing the case's exposure to lead sources

Reducing the impact of exposure or eliminating it

Ensuring that exposure to other sources does not occur.

#### Education

The case or relevant care-giver should be informed about the effect of the blood lead level and the likely causes. In particular, emphasis should be placed on minimising the exposure of young children and pregnant women to sources of lead.

Information for community members and health care professionals is available from PHUs.

Great or equal to 45µg/dL( ≥2.2  $\mu$ mol/L)



The Office of Environment and Heritage Pollution or telephone 131555

Other information on lead is also available from the <u>NSW Environment Protection</u> <u>Authority</u>

#### **Exposure Investigation**

- The case or relevant care-giver should be asked about sources of lead contamination such as:
- Lead paint on houses built before 1970 (including the case's and neighbouring houses), and in particular (i) any renovation or demolition of these houses and (ii) whether a young child is known to engage in eating soil and paint (pica).
- Involvement in high risk occupations, including lead mining and smelting, metal repair or foundry work, painting and decorating, automotive (including radiator) repairs or breaking down old car batteries
- Engaging in high risk hobbies involving lead or lead paint, including casting metal sinkers, antique furniture restoration, lead soldering, lead lighting and indoor shooting
- Living in an area associated with large and small lead industries or areas with historic high traffic flow
- Household pets which may provide an exposure pathway for lead dust
- Use of traditional medicines such as Ayurvedic or Burmese remedies.
- Infants who regularly chew or suck on painted toys, cots, window sills, paint chips, etc.
- Other potential sources such as sandpits, vegetable gardens or domestic poultry
- Further information on occupational sources of lead can be obtained from <u>SafeWork NSW</u> on 13 10 50.

#### ...Environmental Evaluation

If the source of the exposure is not clear after the initial investigation has taken place, the PHU should arrange for an environmental assessment of the residential area if the case's blood lead level is in excess of 25  $\mu$ g/dL (1.2  $\mu$ mol/L) and/or the implicated source may affect the broader community.

#### **Environmental Control measures**

The Public Health unit response to any exposures identified will need to be tailored to the specific risks identified. General advice can be provided by telephone or the provision



of information such as factsheets, or advice on managing lead paint in the home (for example refer to <u>Lead Safe Blitz video</u>)

In some instances an EHO may provide an assessment through a home visit. Householders (or the landlord of the property) may also be advised to engage the services of an independent assessor or remediator to advise or assist with exposure risk reduction.

[end of extract of NSW Health's Lead in Blood: Control Guideline for Public Health Units.]

- The only advice I would add in that last paragraph (above) is that independent assessors of residential/non-occupational lead contamination are as rare as hens teeth for most of the NSW population but a Public Health Officer, armed with a LEAD Group DIY-Sampling Lab-Analysis Kit, could make an excellent assessment of lead sources in a home and yard, childcare centre, Council property such as a library or hall, pre-school, school, park or playground, etc.
- The huge advantage of a LEAD Group Kit (available for purchase only from <u>www.leadsafeworld.com/shop</u>) is that the Kit price/s include a report with recommendations on lowering blood lead levels of those exposed to the samples that have been tested, including lowering blood lead levels in pets and poultry, and thus in eggs.
- A LEAD Group Kit can even be used by a professional remediator to check whether their lead abatement work or lead removal (of paint, ceiling dust, soil, lead flashings or paint from rainwater collection rooves, etc) has indeed made the premises lead-safe.

#### Northern Territory (NT)

Emailed response:

- An elevated lead level is not a notifiable condition in the Northern Territory.
- The making of an elevated lead level to be formally notifiable is currently under consideration within the NT.
- The NT Dept of Health is developing a public health response framework for cases of elevated lead levels.



By Michael Peter Galvin, Queenstown, Tasmania, with experience in Environmental engineering, Science, Conservation, Land and Water Management, M.Sci(EnvMan), B.Eng(Env), Cert.3.NRM, PDC

- See Part 1 of this article in LEAD Action News volume 16 number 2, March 2016, at: http://www.leadsafeworld.com/lanv16n2-lead-safe-world-posters-now-available/
- In one way the Leura Rifle Club (in the Blue Mountains, NSW Australia) protects the Aboriginal Site from the public because literally none had been there for a very long time. See photos (below) of the Leura Rifle Range that continues to be used despite my report and the Indigenous Elders there wanting protection, proof of lead contamination, and a Senior Archeologist who was a past Parish Priest in Lawson visited the site. He confirmed the stop butts of 70 years of rifle use is a rare traditional Ochre Mine used by Aboriginal People for thousands of years.
- The hillside experiences groundwater flow and is contaminated, and there is high lead in the bottom of the creek too. This is a problem for Fresh Water Crayfish and anyone who wishes to ingest it, or if someone unknowingly drinks the fresh mountain spring water. None of the residents, except club members, that have moved in around the range in the last twenty years within 200m from the range like it and there have been a number complaints over the years silenced and no action taken to assess noise or lead. In fact the World Heritage Institute had not been there in 30 years and this place should really be part of the World Heritage being an Aboriginal Place with no consent to destroy, and Highland Peat Swamp on valley floors and hanging swamps that are protected under the EPBC (Environment Protection and Biodiversity Conservation ) Act.



Ochre mining photo: the spectrum of colours in the clay with holes where clay was



dug out and traded for a very long time and used as a trading medium between different Aboriginal tribes that met in the Blue Mountains.



A cave system to the left of the rifle range large enough to keep 50 people dry with a shower at the end. There are bullet wounds from the past here, hard to see unless you look close, from another trajectory of shooting in the past. Not a lot of corroding bullets impregnated in the rocks - however they are there.



A beautiful pattern in a rock to the right of the rifle range where there is seating where the elders may have sat. This horseshoe shape was evidently created by chemical reactions over a very long time.



**Evidence of corroding bullets** impregnated in the rocks of the cave entrance.

- We should be more responsible about preserving Aboriginal Places and Hanging Swamps and Swamps on Valley Floors which are of high conservation value. It is inappropriate to pollute a Blue Mountains Creek with lead given it borders the World Heritage National Park and fresh water crayfish inhabit the creek.
- Where I live now, I'm concerned about heavy metal risks to residents from mining activities and dilapidated building or high risk paths in Gormanston, Tasmania.
- Note they do not mine lead they mine copper but used to discharge tailings straight into the Queen River, as well as smelters in the past, and other mines contributing to acid mine drainage and heavy metals in the environment. Apparently the Oates Family however lived where there was once a car yard whereby lead acid batteries may have been discharged into the environment and there are a lot of old cars and heavy metals in the creek behind the property today.
- I proposed a remediation plan at the time for the site however got no response for this. I proposed to make small check dams in the creek and use an industrial vacuum to remove the lead from the creek bottom and filter this and the contaminated hillside substrate through a hydraulic sluice and mine out the lead from the site followed by rehabilitation of the hillside with plants such as lomandra that can be pruned regularly and will help suck the lead out of the soils there. It is also recommended by a traditional owner that the site be protected from the public and preserved properly in the future. No one is to blame, it is a hard issue for anyone who is probably why it was left alone for so long and in a way the rifle range use has protected the site from the public.



- Having said this there are obligations under the EPBC Act to preserve highland peat swamps, to remediate the lead contamination under the Contaminated Lands Management Act, and Native Title proposal and consent to destroy an Aboriginal Place. There are also obligations of public service to respond to residents' complaints, especially if it affects their health and peace, land values and such like and residents should not feel silenced and ignored if they are concerned about noise, lead, and safety associated with the rifle range being so close to residential areas now.
- It is ironic that I have ended up in Gormanston next door potentially to where the Oates Family lived. There has been a long history of mining, smelters, and heavy metals in the environment including contamination of the Queen River with heavy metals, with no one claiming ownership and responsibility for it today, as well as acid mine drainage issues.

Public Health and Ecological Sustainability is number one. Let there be peace in Tassie, and on the mainland!

## Heavy metal contamination and lead in mains water - articles from Tasmania

The following articles were submitted by Isla MacGregor

STATE: TasWater emails show company planned to hit back at scientists

Michael Atkin, ABC. First published April 11 12.04.16 4:20 am <u>15 comments</u>

## Documents appear to show TasWater had a strategy of avoiding unwelcome independent scientific findings about lead contamination in the water supply in north-east Tasmania.

Internal communications obtained by the ABC under Right to Information laws have revealed that TasWater planned to hit back against the scientists by challenging their research.

TasWater strongly denies any wrongdoing.

Unsafe lead contamination was first discovered in the drinking water in the small regional town of Pioneer in 2012.

Last year environmental scientists from Macquarie University, Professor Mark Taylor and PhD student Paul Harvey, released a peer-reviewed study into Pioneer's water problems and claimed to have found answers.

They reported lead levels inside houses in Pioneer were 22 times above the safe drinking standard, which they described as the worst in Australia.



Professor Taylor and Mr Harvey explained their findings at a community meeting in Pioneer last April and invited the Department of Health and TasWater to attend, but TasWater declined.

A TasWater briefing note written before the meeting and sent to senior scientific and communications staff appears to show why.

#### Read the full story, ABC HERE

• Peter in Comments: TasWater has failed to disclose a possible conflict of interest in its review of the original Macquarie University research by an industry body called Water Research Australia. One of the directors of WRA happens to be a manager with TasWater ...

TIM SLADE (and Isla MacGregor) have written extensively about Pioneer's contaminated water on Tasmanian Times ...

- Pioneer folk wonder if TasWater's WorkSafe Tasmania Award is a joke ...
- Local councils Vote for Transparency at TasWater
- <u>A typical kneejerk response ...</u>
- The Pioneer Cup: Horse-trading for safe drinking water in Tasmania
- The Pioneer Cup: Horse-trading for safe drinking water in Tasmania

• <u>Toxic TasWater</u>, <u>Part 2</u> ~ <u>From the Operating Room to a Public Meeting with the</u> <u>Health Minister</u>

<u>Toxic Tas Water</u>

AND ...

• <u>TasWater concedes NE Tas water may have been contaminated for years. A Will ...</u> <u>but no way?</u>

- Rosebery 7 years on and still waiting for safe water?
- Told you so, TasWater, TasWater and Dr Roscoe Taylor
- <u>The axing of Pesticide Monitoring in Waterways</u>
- <u>Tasmania's water dilemma</u>

• Janine Britten in Comments Rosebery residents have been putting up with brown discoloured water for the past 3 months, which in this day and age is not acceptable. On contacting TasWater on Wednesday 6th april 2016, within two days the drinking water was clear ... is this telling us something;



TasWater have been cost-cutting and not chlorinating the Rosebery water supply; after telling them of residents who were complaining of headaches and itchy skin they decided to act . When it rains the water is usually discoloured for a few days then clears but the past 3 months we have had very little rain, and discoloured water... !

• Alison in Comments: Parkinson's 'cluster' in rural Victoria could be linked to pesticides, researchers say

TASMANIAN PUBLIC AND ENVIRONMENTAL HEALTH NETWORK

**REGULATION OF CONTAMINATED SITES** 

Legislative amendments

#### **Options Paper**

**Updated September 2012** 

#### **KEY AMENDMENTS OUTLINED IN POLICY PAPER**

A free, publicly accessible Contaminated Sites Register

- 2. Protection of innocent landowners
- **3.** Household audit services
- **4.** Abatement funds to pay for hazard removal and management
- 5. Mandatory disclosure to tenants and purchasers
- **6.** Community engagement for Level 2 and 3 activities
- **7.** Public and environmental health investigations conducted in collaboration with affected communities
- **8.** Monitoring off-site sediments

The Tasmanian Public and Environmental Health Network policy paper released in September 2011 outlined the key elements that we consider essential to an effective regulatory framework for contaminated sites. This updated position paper outlines our preferred legislative and policy approach to implement such a framework in Tasmania.

#### 1. A free, publicly accessible Contaminated Sites Register

The Contaminated Sites Unit currently maintains a number of registers:

§ Contaminated Sites Register, including records of land and water contamination;



§ Environmentally Relevant Land Use Register, including details of environmentally relevant activities historically undertaken on site;

§ New Environmental Licensing and Monitoring System, including a database of EPNs and other management documents; and

§ Incidents database, setting out records of complaints, notifications etc made in respect of a property.

At present, these databases are not freely available (the cost to search the register is \$77 per property) and are often not a comprehensive record of actual or potential contamination. To ensure that data in relation to contamination is easily accessible, in obvious locations that will come up using basic internet research skills, TPEHN believe that the government should:

<sup>n</sup> Undertake further work to improve knowledge regarding the extent of contamination in Tasmania;

<sup>n</sup> Maintain a comprehensive, on-line Contaminated Sites Register including all the information categories currently held by the Contaminated Sites Unit;

Ensure that the LIST includes information about whether a property is on the Contaminated Sites Register.

#### **RECOMMENDED ACTIONS AND AMENDMENTS:**

§ Government to dedicate resources towards developing comprehensive databases, and making the information available, free of charge, through the LIST. The LIST must also include reference to any health advisory note issued in respect of the property under the Public Health Act 1997.

§ Insert a new provision in EMPCA establishing a Contaminated Sites Register:

#### Section 74Z

The Director is to maintain a register containing:

(a) details of all notices issued under s.74C;

(b) a description of the location of each site subject to a notice under s.74C;

(c) a description of the nature and extent of the known contamination of each site subject to a notice under s.74C;

(d) any progress report submitted in respect of land subject to a notice under s.74C;

(e) any Annual Monitoring Review submitted in respect of a use or development undertaken on land identified as an Environmentally Relevant Land Use.

(2) A person is entitled to search the register referred to in subsection (1) and obtain copies of any document (including all attachments) referred to in the register without payment of a fee.

## 2. Innocent landowner provisions for property owners



Section 74B of EMPCA requires the current owner or occupier of land known or suspected to be contaminated to notify the Director regarding the contamination. We are concerned that this provision, in addition to the general environmental duty, will place an undue burden on an owner or occupier who was not responsible for the contamination (and did not reasonably have cause to believe that the land was contaminated). Part 5A of EMPCA currently addresses this is the following ways:

§ Notices are to be issued to the person who caused the contamination in the first instance, even if they are no longer the owner of the land. If the person responsible cannot be found or is bankrupt, the Director may only issue a notice to the current owner if s/he

§ Became the owner after the commencement of Part 5A and should not reasonably have been expected to believe that the land was contaminated at the time of purchase; or

§ Has accepted responsibility for contamination issues associated with the site (written documentation of this agreement is required).

§ When determining what work should be required under a notice, the Director is to have regard to the period during which all relevant parties were responsible for the land, the use to which each of them put the land and whether they were responsible for any known or likely incident during that time.

§ Where a notice is not complied with, the Director can carry out remediation work and recover the costs from the person who should have been responsible for the work (ss.74S and 74T).

This approach provides some protection for 'innocent landowners', but still allows some situations in which a landowner who has inadvertently purchased contaminated land to be subject to remediation costs in order to make their property liveable. TPEHN believe that further protection should be offered to ensure that people who unwittingly purchase contaminated sites are not subject to unfair clean-up costs.

The approach adopted in jurisdictions which have innocent landowner provisions is generally to allow a 'grace' period in which people on properties which they know or suspect may be contaminated can apply for an exemption certificate.

We note that innocent landowner provisions work most effectively in jurisdictions with comprehensive and accessible databases of contaminated sites. This is because it is easier for a potential purchaser to determine whether a site is subject to contamination, rather than to 'innocently' discover after purchase that they will be subject to considerable clean-up costs.

#### **RECOMMENDED AMENDMENTS:**

§ Insert a new section 74BA of EMPCA:

#### Section 74BA Exemption certificates

(1) An owner of land who gives notice to the Director under section 74B within 2

years of the commencement of this section may apply for an exemption certificate.

An application for an exemption certificate must be made in the prescribed form.



(3) Within 28 days of receiving an application, the Director must issue an exemption certificate to the owner if satisfied that:

(a) the land is a contaminated site;

(b) the person is not wholly or partly responsible for causing or possibly causing the area of land to be a contaminated site;

(c) the person did not fail to prevent any pollutant from escaping, being discharged, emitted or released on, onto or under the land, as far as it was reasonably within the person's control to prevent or minimise the escape, discharge, emission or release of a pollutant; and

(d) the land was a contaminated site at the time the person became an owner of the land and, at that time, the person did not know, or suspect, and could not reasonably have known or suspected, that the land was a contaminated site.

If not satisfied of the matters in subsection (3), the Director may refuse to grant an exemption certificate in respect of the land.

(5) Within 14 days of receiving an application under subsection (1), the Director may request such further information as the Director considers necessary to make a determination under subsection (3).

(6) If further information is requested under subsection (5), the period of time referred to in subsection (3) does not run while the request for information has not been answered to the satisfaction of the Director.

(7) If an application for an exemption certificate is refused under subsection (4), the applicant may, within 14 days after the day on which notice of the decision is served, appeal to the Appeal Tribunal.

§ Replace s.74C of EMPCA with the following:

#### Section 74C Contaminated Site Notices

Subject to subsection (2), the Director may issue one or more of the following notices in accordance with this Division:

- (a) an investigation notice;
- (b) a remediation notice;
- (c) a site management notice.

A notice under subsection (1) cannot be issued to a person to whom an exemption certificate has been granted under section 74BA, to the extent provided for in the exemption certificate.

#### EPA to fund household audit services for any person residing on contaminated property

#### 4. EPA to fund costs of removal of any relevant hazards found during household audits

The Environment Protection Fund established under s.97 of EMPCA is managed by the EPA Board and is currently able to be used to:

#### § Pay out financial assurances and amounts due under environmental agreements;



§ Cover the costs of dealing with environmental emergencies;

§ Undertake education and training programmes in relation to the "protection, restoration or enhancement of the environment";

§ Investigate, research or conduct pilot projects relating to the "protection, restoration or enhancement of the environment"; and

§ Make grants for environmental improvement purposes (defined in s.99 to include acquiring and applying knowledge for improving the environment, training people to carry out research, provision of advice and assistance to people carrying out environmental activities, publication of reports etc).

Arguably, these objectives are broad enough to allow the Fund to be used to provide for audit services and an abatement fund in respect of contaminated land. However, to ensure that money can be made available for that purpose, TPEHM recommend that the legislation be amended to explicitly allow funds to be allocated to those activities.

#### **RECOMMENDED ACTIONS AND AMENDMENTS:**

§ The government should allocate money from the Environment Protection Fund for the purposes of conducting household audits and assisting affected households to take remediation measures, internally or under contract to an appropriate organisation.

§ Amend s.97(3) of EMPCA by adding the following subsections:

(g) for the purposes of conducting investigations relating to the identification and remediation of contamination;

(h) for the purposes of assisting any person to whom an exemption certificate has been granted under section
74BA to take action to minimise the impact of contamination on their property.

#### Mandatory disclosure to tenants and purchasers of contaminated properties

#### **Potential purchasers**

TPEHN note that the best protection will be offered to potential purchasers by ensuring that the contaminated sites register is comprehensive, readily available, easy to search and widely publicised. However, we recommend several additional amendments to provide greater assurance that purchasers are made aware of actual or potential contamination on residential properties.

#### Vendor disclosure

Part 10 of the Property Agents and Land Transactions Act 2005, which has yet to commence, requires a vendor (including an agent) to ensure that "relevant disclosure documents" are available for any potential purchaser to inspect. It is an offence not to provide the disclosure documents, or to provide false or misleading information in the disclosure documents. A purchaser can rescind a contract of sale (prior to settlement) if the vendor did not comply with the disclosure obligations.



The Property Agents and Land Transactions Amendment Regulations 2010 set out in detail the information to be included in the "relevant disclosure documents" for any sale of <u>residential</u> land. Regulation 41C requires a vendor to complete a statement relating to his/her period of ownership which includes details of "any notices received in relation to soil contamination" and whether building materials are likely to have contained asbestos.

Commencement of the proposed regulations will address some of TPEHN's concerns relating to disclosure of information regarding contamination.

In addition to the specific requirements of the vendor disclosure statement, s.196 of the

Property Agents and Land Transactions Act 2005 (which is also yet to commence) states:

#### 196. Liability of agent

In addition to any disclosure of information required of a vendor under this Part, an agent of the vendor must disclose to a prospective purchaser any information that the agent knows or ought reasonably to know is likely to affect the purchaser's decision to purchase the residential land.

(2) An agent of a vendor is liable for any loss or damage arising from a failure to disclose to a purchaser any information which the agent knew or ought reasonably to have known was likely to affect the purchaser's decision to purchase the residential land.

#### **RECOMMENDED ACTIONS:**

§ Include links to the Contaminated Sites Register (once established) and the CSU search request forms from the Consumer Affairs and the REIT websites;

§ Commence Part 10 of the Property Agents and Land Transactions Act 2005;

§ Insert Part 5A (Disclosure Documents) into the Property Agents and Land Transactions Regulations 2006 (as proposed by the draft Property Agents and Land Transactions Amendment Regulations 2010, but amended to include "any health advisory note issued under the Public Health Ac 1997" in the disclosure documents referred to in r.41C.

#### Local government certificates

During most conveyancing transactions, a potential purchaser will obtain a Land Information Certificate from the local council under s.337 of the Local Government Act 1993. Pursuant to r.44A of the Local Government (General) Regulations 2005, a council land information certificate is to:

- § Be in the form set out in Schedule 6 of the Regulations; and
- § Answer the questions prescribed in Schedule 7.

Section 74H of EMPCA requires copies of any contaminated site notice to be served on the council for the area in which the land is situated, therefore TPEHN consider it appropriate to require information regarding such notices to be included in the land information certificate.

#### **RECOMMENDED AMENDMENTS:**



Amend Schedule 7, Part 2 ("Public Health and Environmental Matters") of the Local Government (General) Regulations 2005 by inserting the following after No. 10:

#### Environmental Management and Pollution Control Act 1994

- No. Question Answer
- 10A. Contaminated Sites Notice

(a) Has the council a record of an investigation notice, a remediation notice or a site management notice being issued under <u>Part 5A</u>, <u>Division 3</u> of the Act in relation to the specified land?

(b) If YES to (a), provide particulars.

#### Public Health Act 1997

- No. Question Answer
- 10B. Health Advisory Note
- (a) Has the council a record of any health advisory notes issued in relation to the specified land?
- (b) If YES to (a), provide particulars.

#### Tenants

There are not currently any legislated disclosure requirements in respect of rental properties, other than in respect of the condition report. There are two options for ensuring that any notifications regarding contamination are disclosed to tenants:

A stand-alone duty of disclosure; or

**2.** Requiring the condition report to include details of any contaminated site notice issued in respect of the property.

In either situation, a tenant should be entitled to terminate a tenancy agreement where the landlord has failed to comply with disclosure obligations.

#### **RECOMMENDED ACTIONS AND AMENDMENTS:**

§ Include links to the Contaminated Sites Register (once established) and the CSU search request forms from the Consumer Affairs and the REIT websites;

§ Insert a new provision 14A in the Residential Tenancy Act 1997:

#### 14A. Property Owner Disclosure Statement

A residential tenancy agreement must include a signed disclosure statement from the owner of the residential premises (or an agent of the owner) in the prescribed form.

#### (2) Any person signing a disclosure statement must not knowingly or recklessly



- (a) supply false, inaccurate or misleading information; or
- (b) fail to supply all the information required to be included in disclosure statement.

Penalty: Fine not exceeding 50 penalty units

§ Insert a new Regulation 12 and Schedule 3 in the Residential Tenancy Regulations 2005:

#### **Property Owner Disclosure Statement**

For the purposes of section 14A of the Act, a disclosure statement is to be in accordance with Schedule 3.

**Schedule 3** should include similar information to that required to be disclosed in a vendor disclosure statement under the draft Property Agents and Land Transactions Regulations 2010, including any contaminated sites notices and whether the building is likely to contain asbestos and any health advisory notes in respect of the property.

- § Amend s.38 of the Act by inserting a new (1)(d)-(e):
- (d) the owner failed to provide a signed disclosure statement in accordance with section 14A; or

(e) the tenant becomes aware that the owner provided false information, or failed to disclose relevant information in the disclosure statement provided under section 14A.

#### Community engagement for Level 2 and 3 activities

The recent experience of residents in Copping in relation to the proposed hazardous waste facility demonstrates the inadequacy of current public notification provisions as a means of informing the community regarding proposed developments. Where a development is likely to have a significant impact on the environment, economy or the local community, more active community engagement is required.

The EIA Principles outlined in s.74 of EMPCA require an opportunity for "public consultation on the proposal before the assessment process is complete". However, there is currently nothing which requires any active community engagement beyond small notices in the newspaper, letters to immediately adjoining owners and signs on the site. Where, like the Copping waste depot, the site is not on a main thoroughfare, the minimum statutory notification requirements provide no guarantee that affected community members will be aware of a proposal, or of their right to participate in its assessment.

Community engagement is needed to ensure that an affected community is aware of development proposals, including potential risks and proposed management responses. More effective community engagement will also facilitate more constructive feedback during the public comment period, and may result in developments that are more acceptable to the community.

TPEHN consider that the following use and development should be subject to mandatory community engagement activities:

- n Level 2 activities under EMPCA;
- n Projects of Regional Significance under LUPAA; and



Projects of State Significance under the State Policies and Projects Act 1993.

TPEHN recommend that amendments be made to require the Director of the EPA to direct a proponent to undertake community engagement activities prior to the formal comment period in respect of one of these developments. The extent of necessary community engagement will differ for each project, and should be determined by the EPA. Community engagement activities must include, at a minimum, an information sheet regarding the proposal (and opportunities to comment) delivered to all homes in a specified area, and at least one of the following:

n Public meetings

Information stall at local shopping centre

n Advertisements in local publications (e.g. local newspaper, school newsletter)

Invitation to specified community organisations to meet with the proponent for a briefing regarding the proposal.

#### **RECOMMENDED AMENDMENTS:**

§ Insert new s.74AA of the Environmental Management and Pollution Control Act 1994:

#### 74AA. Community Engagement Directions

If the Director is required under this Act or any law to issue a Community Engagement Direction, the Director is to cause a Community Engagement Direction to be issued and served on the proponent in accordance with this section.

(2) Unless section 74AA(3) applies, the Community Engagement Direction -

(a) is to specify the use or development to which it relates; and

(b) is to require the proponent to take specified community engagement activities in relation to that use or development, which must include the activity described in <u>subsection (5)(a)</u>; and

(c) may require the community engagement activities to be carried out in a specified manner; and

(d) is to contain a statement that the proponent may, within 14 days from the date on which the direction is issued, appeal to the Appeal Tribunal against the direction or any requirement contained in the direction.

(3) If the Director is satisfied that no community engagement activities are necessary in respect of the use or development, the Community Engagement Direction is to

state that the proponent is not required to carry out community engagement activities and provide reasons for that decision.

(4) The Director may only be satisfied under <u>section 74AA(3)</u> if the Director reasonably believes that any person who may be affected by the use or development is already aware of the activity.

(5) For the purposes of this section, "**community engagement activities**" includes, but is not limited to, the following activities:



(a) information sheet provided to all owners and occupiers of properties within a specified distance of the land that is the subject of the application ;

(b) holding a public meeting;

(c) advertisement in a local publication, including a local or regional newspaper, Council Bulletin or school newsletter;

(d) invitation to specified local organisations to meet with the proponent to discuss the application.

§ Amend s.74 of EMPCA by inserting the following paragraph after (6):

**(6A)** if required by the Director pursuant to <u>section 25(2)(ab), 25A(1)</u> or <u>27(3A)</u>, an environmental impact assessment must be carried out in accordance with any Community Engagement Direction issued under <u>section 74AA</u>.

§ Amend s.25 of EMPCA by replacing s.25(2)(b) with the following:

(ab) the Director is to issue a Community Engagement Direction to the proponent in accordance with section 74AA;

(b) the planning authority is not to advertise the application in accordance with <u>section 27G</u> until it has received written notice from the Director that the Board has received sufficient information to satisfy the requirements of <u>section 74(3)</u>, and the requirements of any Community Engagement Direction have been met; and

§ Amend s.25A(1) of EMPCA by inserting a new paragraph:

(ab) is to direct the Director is to issue a Community Engagement Direction to the proponent in accordance with section 74AA;

§ Amend s.25A of EMPCA by inserting a new subsection:

(2A) If a Community Engagement Direction is issued under <u>section 74AA</u>, the period referred to in <u>subsection (3)</u> does not run while the requirements of the Community Engagement Direction have not been met to the satisfaction of the Board.

§ Replace s.26 of EMPCA with the following:

#### Assessment of level 3 activities

Where an order has been made under section 18(2) of the State Policies and <u>Projects Act 1993</u> declaring a project to be a project of State significance, a direction under <u>section 20(1)</u> must require the Tasmanian Planning Commission established under the <u>Tasmanian Planning Commission Act 1997</u> to undertake the integrated assessment of the project of State significance in accordance with the Environmental Impact Assessment Principles.

(2) The Tasmanian Planning Commission may direct the Director to issue a Community Engagement Direction to the proponent of the project of State significance in accordance with <u>section 74AA</u>, and the Director must comply with that direction as if it was a direction given by the Board under <u>section 27(3A)</u>.

§ Amend s.27 of EMPCA by inserting a subsection:



(3A) Without limiting <u>subsection (3)</u>, and subject to <u>subsection (4)</u>, the Board is to direct the Director is to issue a Community Engagement Direction to the proponent in accordance with <u>section 74AA</u>;

Amend s.20 of the State Policies and Projects Act 1993 by inserting new subsections (3)(ab) and (6):

(3)(ab) community engagement activities to be required in relation to the integrated assessment;

And "Community engagement activities" has the same meaning as in section 74AA of the Environmental Management and Pollution Control Act 1994

# Public and Environmental Health investigations to be conducted in collaboration with affected communities

Any public health or environmental investigation in respect of a "proposed environmentally relevant activity" is to be undertaken in accordance with the Environmental Impact Assessment Principles in s.74 of EMPCA. However, though the EIA Principles require an opportunity for "public consultation on the proposal before the assessment process is complete", they do not actively require community involvement in all stages of the assessment process.

Furthermore, as the requirement for investigations to comply with the EIA Principles is limited to "proposed" activities, it may not capture investigations regarding the impact of existing operations or particular incidents.

Under s.24 of the Public Health Act 1997, the Director of Public Health may carry out investigations in relation to public health issues. For the investigation, the Director may require any person to give evidence and answer relevant questions, and may require the production of any relevant documents. There is no provision for community involvement in the conduct of these investigations.

TPEHN recommend that amendments be made to establish an Investigation Panel for public health investigations related to contamination of land or water. The Panel could include representatives of the Director of Public Health, the EPA, the affected community and any relevant industry body (depending on the nature of the contamination). The Panel would have all powers of the Director in respect of investigations.

#### **RECOMMENDED AMENDMENTS:**

§ Insert the following definition in s.3, following 'contaminant':

"contaminated site" has the meaning given by <u>section 74A</u> of the Environmental Management and Pollution Control Act 1994;

§ Replace s.24 of the Public Health Act 1997 with the following provision:

#### 24. Investigation

Subject to subsection (3), if a matter does not, in the opinion of the Director, justify an inquiry, the Director may carry out any necessary investigation into the matter.

- (2) In carrying out an investigation, the Director –
- (a) has the powers specified in section 22; and



(b) may take any action the Director considers necessary to protect public health.

(3) Where an investigation relates to land that is, or is likely to be, a contaminated site, the Director must refer the investigation to an Investigation Panel established under <u>section 39A</u>.

(4) For investigations referred under subsection (3), the Investigation Panel is to conduct the investigation in accordance with section 39B.

§ Insert the following provisions after s.39 of the Public Health Act 1997:

#### **Division 7 – Investigation Panel**

#### 39A. Investigation Panel to be established for public health investigations on contaminated sites

Where the Director intends to carry out an investigation under section 24 in respect of any land that is, or is likely to be, a contaminated site, the Director is to establish an Investigation Panel to conduct the investigation.

(2) The Investigation Panel is to consist of –

(a) the Director, or a person nominated by the Director, who is the chairperson of the Panel; and

(b) the Director of the EPA Board under the Environmental Management and Pollution Control Act 1994, or a person nominated by the Director of the EPA Board; and

(c) a representative of the community adversely affected by the public health issues being investigated as part of the investigation; and

(d) a person with appropriate qualifications and experience in relation to contaminated sites, to be agreed on by the persons appointed under subsections (2)(a), (b) and (c); and

(e) two persons who, in the opinion of the Director, has qualifications or experience relevant to the investigation  $^1$ 

At least one of the persons appointed under section (2)(e) is to be nominated by the person appointed under subsection (2)(c).

#### **39B.** Investigation of contaminated sites

In carrying out an investigation under section 39A, the Investigation Panel -

- (a) has all the power of the Director specified in <u>section 22</u>;
- (b) must provide opportunities for public consultation;
- (c) may request the Director to take any action the Panel considers necessary to protect public health.
- (2) Subject to subsection (1), the Panel is to determine its own proceedings.

#### **Monitoring off-site sediments**



TPEHN remains concerned that monitoring in relation to industrial activities is limited to monitoring emissions from the site, rather than monitoring sediment quality off-site, within a radius in which particulate emissions would settle.

#### **RECOMMENDED ACTIONS**

S All permit conditions in respect of monitoring should ensure that an adequate sample of offsite sediments is regularly monitored to assess and manage off-site impacts.

<sup>1</sup> For example, if the contamination relates to mining, someone with expertise in relation to rehabilitation of mining sites.

Contaminated Waterways, Areas and Sites in Tasmania - A to Z

From SourceWatch

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Contaminated Waterways, Areas and Sites in Tasmania - A to Z

Contaminated Areas and Sites Legislation for Tasmania

**Tasmanian Public and Environmental Health Network** is reviewing the Tasmanian *Environmental Management and Pollution Control Act* [Part 5A - Contaminated Sites] and with advice from the Tasmanian Environmental Defenders Office have developed some key amendments.



The Tasmanian Public and Environmental Health Network's Contaminated Sites Legislative Amendments Position Paper December 2011 can be found at:

*Toxic group's call for reforms on regulation of contaminated sites* Tasmanian Public and Environmental Health Network *Tasmanian Times*, 14th December, 2011

[1]

The Tasmanian Public and Environmental Health Network's revised Contaminated Sites Legislative Amendments Options Paper September 2012 can be found at:

Tasmanian Greens called on to support pollution control reforms TPEHN & CRCSBCS Tasmanian Times, 14th September, 2012

**TPEHN Legislative Options Paper Download** 

Background

Turning Tips into Playgrounds

During the 1960s the conversion of suburban tips in Hobart into playing fields and childrens recreation areas was a popular activity. According to the **Hobart City Council** it made economic sense.[1] At the time the council envisaged converting 60 acres of old refuse sites over the next 30 years [tips located at the Cross Roads on the Domain, at Wellesley Park in South Hobart, at New Town Bay and at Whitton's Quarry near the suburb of Dynnyrne]. These suburban rubbish tips are now well used sports ovals and outdoor recreation areas.

Water Contamination from existing Tip and Waste Sites

In 2001 a report of **water contamination** at existing tip sites in Tasmania highlighted the longterm effects of waste disposal on groundwater quality. The report identified five disposal sites that had contaminated groundwater; it included the Hobart City Council's waste dump at McRobie's Gully located in the suburb of South Hobart. The other sites with groundwater concerns were at **Port Latta**, **Port Sorell**, **Mt George** near Georgetown and **Bridport**.[2]

"Groundwater contamination has been discovered mostly on older sites which were not built to current standards but which have met the standard of the day", the then Minister of the Environment, **David Llewellyn** said.

Mr Llewellyn said that while the **Minerals Resources Tasmania** report would not be finalised until November 2001, the Government believed it was necessary to start working with municipal councils to identify the extent of contamination and determine whether future groundwater protection strategies were required. The study also looked at the two existing land-fill tip sites in the **Glenorchy City Council** municipality at Jackson and Chapel Streets.[2]

In 2002 a **Mineral Resources Report** by **Andrew Ezzy** *The effects of waste disposal on groundwater quality in Tasmania* was made public. Among many serious findings it stated that the **Howrah Landfill site** was an *uncontrolled site*.[3] See also the **Wentworth Park waste** 



**dump - Howrah Tipsite** on Landfill pollution in Tasmania [2] There was no monitoring done during landfilling or when the landfill was opened up for housing.

In 2003 Tasmania's **State of the Environment Report** acknowledged that at least 100 of 176 identified landfill sites were likely to contain toxic substances that could contaminate ground water and soil.[4][5] Submissions from the **Tasmanian Conservation Trust** and various Tasmanian politicians to have such contaminated sites registered on land titles have been unsuccessful[6]

A - Z Waterways and Drinking Water Supplies

BEING UPDATED

#### **Contaminated by Metals**

Main metal contaminants are: Aluminium, Arsenic, Cadmium, Copper, Chromium, Iron, Lead, Manganese, Nickel, Tin and Zinc.

Aberfoyle Creek

Argent Creek

Arthur River

Mount Bischoff Rehabilitation Program, Mineral Resources Tasmania, [3]

Assay Creek [MMG Rosebery mine - ]

Austral Creek

Avoca [township]

Towns issued with water warning, Jodie Stephens, The Examiner 7th November, 2012 [4]

Bakers Creek [MMG Rosebery mine - ]

Boobyalla River

Branxholm Creek

*Trustees of Scott's Estate v The Arba Tin Mining Company*, The Mercury, 17th November, 1910, [5]

**Broderick Creek** 

Colliers Swamp

Comstock Creek

**Concert Creek** 

Conglomerate Creek



#### Cooleys Creek

**Derwent River** 

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Dundas River

East Queen River

Filter Plant Creek [MMG Rosebery mine - ]

Fly By Night Creek

George River

Gipps Creek

GPS Creek

Great Musselroe River

Haulage Creek

Idaho Creek

King River

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Lake Dora

Legerwood Rivulet

Linda Creek

Little Henty River

Little Musselroe River

Lisle Creek

Lucy Creek

Magazine Creek

Main Creek



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Macquarie River

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Marinoak River

Mill Creek

Nike Creek

Officers Creek

Oonah Creek

Parting Creek

Pea Soup Creek

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Pioneer [township]

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Que River

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White Creek

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Whyte River

Wyniford Creek

Zeehan Rivulet

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Williamsford

Zeehan

[In coming months, TPEHN members will upload historical material on many of these wastelandfill sites and add **Googlearth** contacts]

Articles and resources

Related SourceWatch articles

<u>Air pollution in Tasmania</u>

Endocrine disrupting chemicals in Tasmania

Food quality in Tasmania

Landfill pollution in Tasmania

Marine toxicology and pollution in Tasmania

One Health - Human, Animal & Environmental Health in Tasmania

Toxic heavy metals in Tasmania

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Water pollution in Tasmania

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## **Chickens lickin' lead poisoning**

By Paul Maguire, Environment Reporter, Newcastle Herald, Friday April 29, 1994. LEAD BATTERY HENS cartoon by Lewis.

Editor's Note: square-bracketed text added by Elizabeth O'Brien, The LEAD Group, April 18, 2016.



The Newcastle Herald

FRIDAY, APRIL 29, 1994



CHOOKS may not be the smartest things on two legs, but unique research at Lake Macquarie [the Council area near Newcastle in New South Wales which is home to the (now-closed) Pasminco Lead Smelter at Boolaroo] indicates that they can certainly deal efficiently with lead contamination.

They apparently cope with blood-lead levels that would kill humans and other animals, yet hardly any of this poison passes through to their eggs or flesh.

This is the outcome of a Hunter Area Health Service [local area health service of the Hunter Valley of which Lake Macquarie Council is one local Council] public health study of lead impacts on chooks at Boolaroo and Argenton [a neighbouring suburb of Boolaroo].

The unit's director, Dr John Stephenson, was astounded by the extremely high blood-lead levels in the domestic fowls, and the fact that they seemed to function normally and then passed so little of the toxic chemical to their eggs or flesh.

In laymen's terms, the results strongly implied that there was no

danger to humans who ate chicken meat or eggs from northern Lake Macquarie backyard chooks.

The study resulted from resident concerns that eggs and chicken meat produced near Boolaroo's Pasminco zinc-lead smelter could be unfit for human consumption.



Lead contamination [poisoning] reduces children's intelligence quotas, has been linked with [increased] blood pressure in humans, accumulates in pregnant women and can be passed to unborn children.

One of the tested chooks was found to have 435mg [correction, micrograms (µg), not milligrams (mg)] of lead for every decilitre of its blood [ $435\mu g/dL$ ].

The health unit's senior environmental health officer, Mr John James, who conducted the chicken experiment, said dogs were known to die at  $80\mu g$  [ $80\mu g/dL$ ] and humans showed lead poisoning symptoms at  $60\mu g$  [ $60\mu g/dL$ ].

The chicken's level was more than 10 times the highest blood-lead rating found during extensive investigation of the lake region's youth.

The National Health and Medical Research Council set  $10\mu g [10\mu g/dL - in May 2015$  this level was re-set to  $5 \mu g/dL$ ] lead in human blood as a standard point where neurological damage was known to occur.

Twelve backyard Boolaroo chooks and six from Argenton were compared with seven in pens at Medowie [a suburb 45 minutes drive or 44 kms away from Boolaroo, north of the city of Newcastle] for the study.

Dr Stephenson said the small amounts of lead that were detected in eggs and chickens from Boolaroo and Argenton were well below Australian Food Code safety standards.

The findings should help to reassure the community, he said

Dr Stephenson said chooks must have a different way than humans of breaking down lead [compounds?] in their systems.

Some lead went into the chooks' bones and he believed a lot must be excreted in their faeces.

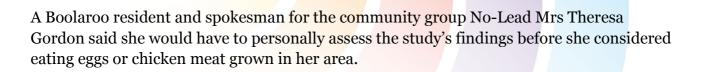
He was unable to comment on whether chooks were too smart or too dumb to be affected by lead.

The chooks appeared to live normal lives and no tests were done on their intelligence.

Dr Stephenson said the chooks probably took in so much lead because they spent much of their time scratching and pecking obviously lead contaminated dirt.

Mr James said the tests, which are understood to be a world-first and have not yet been published in any medical journal, indicated the need for more research.

He said the chooks could have taken in lead from food, water, dust and the air.



## Nivel de Acción en los Hogares para el Plomo en el Agua Potable (Spanish) - Household Action Level for Lead in Drinking Water

Las interesantes contribuciones que siguen fueron enviadas por correo electrónico por el Doctor Tom Neltner (in Marzo, 2016). Tom ha permitido generosamente que sean re impresas en "LEAD Action News" vol 16 no. 2.

Traducidas al Castellano por Orlando Aguirre-López. Para "LEAD Action News" vol 16 no.3.

EHP publicó un impresionante artículo que mostraba la relación entre los niveles de plomo en la sangre y los niveles de plomo en el agua potable. Ref: "Empleo de un Indice Acumulativo de Exposición para Estimar el Impacto de la Concentración de Plomo en el Agua de Llave sobre los Niveles de Plomo en la Sangre en niños de 1 a 5 Años de Edad (Montreal, Canadá)", por Gerard Ngueta, Belkacem Abdous, Robert Tardif, Julie St-Laurent y Patrick Levallois – en <u>http://ehp.niehs.nih.gov//1409144/</u>.

Ellos ajustaron para los factores comunes tales como riesgos de la pintura a base de plomo y la estación del año. Los niveles de plomo en el agua potable aumentan en el verano. Concluyeron que 1 ppb (parte por mil millones) en el agua (1 microgramo por Litro, 1 ug/L) corresponde a 0.35 ug/dL en la sangre de niños con edades de 2 a 5 años.

Los dos supuestos clave fueron 50% de absorción del plomo y 1 mes de vida media para el plomo en la sangre. Lo anterior parece bajo para niños menores y mi entender es que la vida media es posiblemente más larga. El nivel de plomo en el agua (WLL, por su sigla en Inglés) es cerca de tres veces mayor en el verano frente al invierno con base en la siguiente nota del artículo:

"Las medias geométricas de WLL(( $\pm$  SE) fueron 2.7  $\pm$  2.2 µg/L durante el invierno y 8.1  $\pm$  1.5 µg/L durante el verano." El estudio fue hecho en Montreal – donde es bastante frío en el invierno.

Echen un vistazo a la última historia en la excelente serie de "USA Today" sobre plomo en el agua potable en <<u>http://www.usatoday.com/story/news/nation/2016/03/25/epa-household-action-level-lead-drinking-water/82209520/</u>>.



El título es " **El retraso en la liberación del nivel de peligro de plomo en el agua por** parte de EPA genera inquietud, preguntas".

También, si usted está interesado(a) en el asunto, observe mi último "blog" en: <<u>http://blogs.edf.org/health/2016/03/25/lead-hal/</u>.> [sigue el texto]

# Fondo para la Defensa del Medio Ambiente (EDF, USA) Blog Post, 25 de Marzo, 2016.

## El Nivel de Acción en los Hogares para el Plomo en el Agua Potable; EPA necesita liberar Estimativo basado en la Salud.

## Tom Neltner, J.D., es el Director de Políticas sobre los Químicos

Un Nuevo artículo en la serie USA Today's sobre plomo en el agua potable da una luz sobre las demoras de la Agencia para la Protección del Medio Ambiente para liberar "un nivel de acción para los hogares" basado en la salud, para plomo. El Consejo Nacional de Consultoría de EPA para Agua Potable . (NDWAC) recomendó que la agencia desarrolle este número para ayudar a los padres, en consulta con su pediatra y la agencia para la salud, a decidir si invertir en filtro para el agua que usan con el fin de elaborar la fórmula infantil para sus niños.

Sin un número basado en la salud, la gente está utilizando equivocadamente "el nivel de acción" presente de EPA de 15 partes por billón (ppb) como el nivel bajo el cual no se requiere acción. El problema es que este nivel no tiene relación con el riesgo para la salud. Se basa en una provisión en la norma para el agua potable que requiere a los servicios públicos realizar control de corrosión y, potencialmente liderar el reemplazo de líneas de servicio cuando al menos el 10% de lo peores resultados muestra del caso resulta que excede ese nivel.

Un año después de comprometerse a desarrollar un nivel de acción para los hogares, parece estar amarrada en la larga demora de la agencia de su quebrantada regulación de 1991, diseñada para proteger a la gente del plomo en el agua potable. Las comunidades todas a través del país están mostrando legítimas inquietudes acerca de la seguridad de su agua y requieren apropiada guía pública. Ellos no tendrían que esperar por la reglamentación para esta importante información. Sabemos que EPA es una agencia reguladora que piensa en términos de reglamentación. Pero primero y principalmente EPA es una agencia pública de salud con responsabilidad para los consumidores por la seguridad del agua potable.



También entiendo el desafío de desarrollar un estimativo da do que no exposición libre de plomo— la gente puede malinterpretar los niveles por debajo del número como completamente seguros. De otro lado, en la ausencia de tal número, están ya usando en forma equivocada el presente nivel de acción de 15ppb para suponer que el agua es segura y no se requiere actuar.

Hay un precedente para fijar números basados en la salud para diferentes riesgos con el plomo. La agencia lo ha hecho para plomo en el suelo y para plomo en polvo en los pisos en los alféizares de las ventanas. Para el plomo en el polvo, EPA estableció 40 microgramos de plomo por pie cuadrado de piso para hogares e instalaciones ocupadas por niños como la definición de un riesgo que debe ser eliminado. Esto es equivalente a un gramo –la misma cantidad de azúcar en paquete que agregamos a nuestro te – esparcida uniformemente sobre cerca de ½ de un campo de fútbol. La agencia ha fijado este nivel porque ello resultaría en probabilidad 1 to 5% de que un niño cualquiera esté excediendo un nivel de plomo en la sangre de 10  $\mu$ g/dL ( un valor mayor que 10  $\mu$ g/dL era la definición para "alto nivel de plomo en la sangre, en 2001, cuando la regla fue promulgada). Mientras investigaciones posteriores mostraron que el riesgo de plomo en el polvo era mucho mayor y, in 2009, EPA se comprometió a revisar el numero, el cual muestra todavía la importancia de proveer a la gente con un nivel al cual un hogar debería actuar.

Estas medidas ayudan a empleados de la salud pública, agencias de vivienda, y a los padres en una mejor evaluación de riesgos de los azares del plomo, a determinar que deberían ellos hacer para reducir el riesgo, y como guía para fijar prioridades. Un número basado en la salud da capacidad a la gente para hacer escogencias documentadas. La agencia ha hecho eso para el polvo y el suelo. Necesita hacerlo para el agua.

In Febrero de 2015, el grupo de trabajo de NDWAC pidió a EPA desarrollar un valor estimado de un nivel de acción de los hogares que ayudara en el desarrollo de sus <u>recomendaciones</u>. La agencia estuvo de acuerdo y proveyó actualizaciones en <u>Abril 2015</u> y <u>reafirmó su compromiso en Junio 2015</u>. Ningún número ha sido dado.

Dados los desarrollos en pedernal y la evidencia de plomo en los sistemas de agua a través del país (como se explica en una irresistible serie <u>USA Today</u>), la demora es insostenible. <u>EPA no debe esperar en una norma propuesta para actuar</u>. Debe enfocar su experiencia científica en el desarrollo de un buen estimativo, hacerlo público, y utilizar un proceso de revisión con pares externos para garantizar su fortaleza científica.

Para más información sobre <u>Nivel de Acción de los Hogares para el plomo en el agua</u> <u>potable.</u> Ver también www.edf.org/leadpipes<u>.</u>



## Comentario del "LEAD Group" en el EDF Blog Post: Nivel de Acción de los Hogares para el Plomo en el Agua Potable

COMENTARIO PRESENTADO EN:

<http://blogs.edf.org/health/2016/03/25/lead-hal/comment-page-1/#comment-10704

Qué excelente entrada en el Blog, Tom!

A medida que paso la mayoría de mi tiempo aconsejando a padres y a otros sobre niveles de acción para el plomo con el fin de mantenerlos a ellos y a sus familias seguros contra el plomo, he estado esperando que los "niveles de acción sobre el plomo" sean revisados a la baja, en línea, con caída del "nivel de acción sobre el plomo" desde 10ug/dL (microgramos por decilitro) a 5 ug/dL en los EE.UU, y con la propuesta bajada hasta un objetivo de menos de 1ug/dL para el plomo en la sangre en Canadá.

Siendo yo mismo un científico sin los recursos necesarios pero padre , impaciente mi solución mientras que actúe la EPA de EE.UU, ha sido buscar en el mundo los más bajos "niveles de acción sobre plomo' en los diversos medios de comunicación sobre el ambiente, y luego tomar relaciones aritméticas simples dependiendo del "nivel de acción para el plomo en la sangre", al tiempo que "el nivel de acción sobre plomo" para polvo,-o suelo-o agua-etc. Sea recomendado o fijado. Por ejemplo, Australia tiene un nivel de (acción) como "línea guía" de 10ppb (10 ug/L) el cual re fijé en 1 ppb (es decir 1/10) en el momento en que mis Consejeros Técnicos, Profesores Chris Winder, Mark Taylor y Bruce Lanphear escribieron que el nuevo objetivo para todos los niveles de plomo en la sangre debería ser menos de 1 ug/dL (es decir 1/10 del entonces "nivel de acción sobre el plomo en la sangre", de Australia, de 10 ug/dL).

En otras palabras yo recomendaría que los padres usen solamente agua que contenga menos de 1 ppb de plomo para maquillar la formula infantil y si su agua principal o agua lluvia contiene más plomo que ese, que encuentren la fuente del plomo y en concordancia quejarse a la Autoridad del Agua o reemplazar las llaves o tubos, la bomba de agua lluvia o techo o tanque o deshacerse de tapajuntas de plomo, etc.

En mi punto de vista la filtración es la última línea de defensa en la jerarquía de controles y debería usarse como un último recurso si la fuente de plomo se hace imposible.

Similarmente, recomiendo que los alféizares de las ventanas de acceso a niños y pisos donde juegan tengan todos niveles de plomo de "limpia –polvo" por debajo de 12 ug/m2.

Aquí está cómo calculé eso: "Niveles de PbD [plomo en el polvo, por sus siglas en Inglés] en los pisos entre 6 ug/pie2 [aproximadamente 60 ug/m2] y 12 ug/pie2 [aproximadamente 120 ug/m2] puede esperarse que protejan a la mayoría de los niños, que viven en casas anteriores a 1978, de tener un nivel de plomo en la sangre mayor o igual



a 10ug/dL .La protección a niveles menores de plomo en la sangre requerirían menor PbD." Referencia: "Exposición de los Niños Estadounidenses a Plomo en el Polvo de la Residencia, 1999-2004": II, "La Contribución del Polvo contaminado de Plomo a Niveles de Plomo en la Sangre de los Niños" en:

http://www.ehponline.org/members/2008/11918/11918.pdf (14/11/08).

A la luz de la recomendación para el plomo en la sangre de "The LEAD Group" (ver arriba), he aplicado un factor simple de 1/10 a la mencionada conclusión de la Referencia EHP y llegué a la recomendación del nivel de plomo para limpia polvo de "The LEAD Group para Australia (donde 1997 es el equivalente más cercano al estándar de pintura con plomo de 1978:

"Se pueden esperar que niveles de PbD [polvo con plomo, por sus siglas en Inglés] en los pisos de valores entre 6 ug/m2 y 12 ug/m2 protejan a la mayoría de niños que viven en casas anteriores a 1997 de tener un nivel de plomo en la sangre mayor o igual a 1.0 ug/m2. Una protección a menores niveles de plomo en la sangre requerirían un menor PbD."

Con mis niveles de acción para el plomo basados en matemáticas prácticas , sostengo que los padres pueden alcanzar niveles de plomo en la sangre no detectables mientras los cerebros de sus niños están todavía en desarrollo, en lugar de esperar a que el gobierno fije niveles de acción que pueden no ocurrir hasta que esos niños estén en la escuela (y esforzándose).

### Cordialmente

Elizabeth O'Brien, Consejera para Plomo, Asociación para un Mundo Salvo de Plomo. "The LEAD Group Inc.", Australia

# A. Fraser Hobday 2005 Submission into the Inquiry into Workplace Exposure to Dust

The Secretary Senate Community Affairs References Committee Parliament House Canberra ACT 2600

Dear Secretary and Senate Committee,



# INQUIRY INTO WORKPLACE EXPOSURE TO TOXIC DUST

Submission - November 2005

This submission focuses on the past and current practices in the Western Australian bureaucracies that regulate, enforce, and advise on toxic dusts in the workplace and environment.

Included terms of reference:

- a) Health Impacts
- b) Adequacy of Regulation
- c) Information to Employers and Employees of Risks
- d) Availability of Accurate Diagnosis and Medical Services
- e) Availability of Accurate Records, Nature of Illness, Disabilities
- f) Access to Compensation, Limitations in Seeking Legal Redress

The general consensus is that times are very different than the period that allowed Western Australia become the world capital for mesothelioma.

However current and recent handling by WA government agencies demonstrate that toxic dust problems presented to the WA government still continue to be treated without due responsibility, or in an open an accountable manner.

This situation is not confined only to toxic dust management, but also has been exhibited with occupational and domestic chemical use.

Western Australia is probably not alone in this manner of concealment and denial mentality. However with such a history of large-scale deaths caused by previous mismanagement, WA presents a good example that despite such a well-publicised and shamefully miserable track record, the entrenched inertia of public disservice has still not been addressed.

There is no argument that mechanisms such as WorkSafe have improved the occupational environment, but while the mentality of concealment and denial persists within the public bureaucracy, there exists little hope of seriously addressing the issues of human and environmental toxins exposure in the manner that the circumstances warrant.



Far too many cases come to light to believe these are the exception to the rule.

In Ben Hills' investigation, **"Blue Murder, Two Thousand Doomed To Die-"** he illustrates the scenario that allowed so many to suffer and die due to blue asbestos mined at Wittenoom:

"....Tragically for the victims, none of this information emerged from the locked vaults of the Western Australian government until far too late ...when the mine had been closed 20 years, when 2000 people had already been fatally infected...

...the bureaucrats fought to protect their own.

It got to the stage where the (Asbestos Disease Society) searchers were using miniature cameras, like spies in an old B-grade movie, to photograph documents they found in case next time they went looking they were unaccountably missing.

...a story of bureaucratic incompetence and inertia almost unrivalled in Australian political history, ...

the WA Mines department, and the Health Department. Between them they have to share a large portion of the blame for what happened in Wittenoom.

In the margin of the letter, some anonymous civil servant has written that Dr.\*\*\* was "misinformed" and that there was no need for action.

Here are letters to \*\*\*'s own consultant physician, telling him over and over that the men were dying, that something must be done urgently.

... and they tried, without success, to get the Mines Department to act.

In spite of detecting the most outrageous breaches of mine safety laws over a period of more than 20 years, not a single prosecution was ever launched against \*\*\*, no effective demands were ever made for safe ventilation in the mine or the mill, the operation was never shut down for a single day, although it was within their legal power. Instead, at the highest levels of the department, there were attempts to cover up the true extent of the disaster, and to discredit the doctors who doing their best to expose it."

Unfortunately the undercurrent of covert mismanagement still continues today, with no lessons learned from the terrible and shameful Wittenoom saga.

From the LEAD Group, based in New South Wales in an article about a Western Australian worker exposed to lead-oxide dust:

"A disturbing claim made by the mostly male inquirers is the difficulty they have experienced in getting information and appropriate medical advice, often from the very government organisations whose role is ostensibly the protection of workers' health."



In this well-documented case, workers performing fire assay duties were exposed to massive amounts of lead-oxide dusts and fumes while working in a laboratory with insufficient ventilation.

The WA Health Department was monitoring blood lead levels, but neglected to inform the workers of contracting a disease, nor were the workers advised of the requirement for immediate medical treatment.

This was even after the initially exposed worker presented to the Health department with textbook symptoms, high blood lead, and seeking medical treatment. He was informed he *"had nothing to worry about."* 

Despite the first poisoning, other workers were allowed to continue to be exposed to the on-going hazard. The Health Department continued to monitor the blood lead and the workers continued to be exposed to extremely high levels of lead-oxide dust and fumes. One worker eventually collapsed on the job.

On attempting to recover his recorded blood test results from WorkSafe, he was supplied only with "safe" readings. No records exist of the many other blood tests he completed.

The workers are now faced with permanent injuries as a result of their lead poisoning and subsequent failure to receive urgent medical treatment.

Not only are the workers now faced with limited or no work capabilities, but also psychiatric management due to brain injury and permanent neurological damage.

Personal economic losses have been substantial, avoidable pain and suffering endured, yet no avenue is open to claim personal damages against the state for it's negligence, due to the WA government hiding behind the Limitations Act as defence.

It is worthwhile noting that WA government also differs from most other Australian jurisdictions in not allowing a plaintiff to claim for an extension of time due reasonable cause.

Despite apparent breaches of the criminal code, and official complaints, no official has ever been convicted.

In August 2005 the Executive Director of Public Health in WA was requested to investigate the number of workers exposed to high levels of lead during the offending period illustrated above. It is a fair assumption that other workers also may not have been informed of the nature of their exposure and contraction of disease.

Once located, belated management of the workers' health condition may be implemented to improve longstanding symptoms and quality of life.

How many others suffer the disease, but have not been informed?

An investigation is required, but has not been initiated.



Rather, these citizens suffer in designed ignorance.

Although this submission generally addresses the "mentality" past and present of the WA Health and Occupational bureaucracy, occasionally the offending negligent behaviour is demonstrated personally by a WA government official.

To use the word "corruption", one assumes personal benefit by way of payment or other tangible credit. This however devalues the real benefit and status that "brownie points" can achieve for the bureaucrat with a misguided sense of right and wrong.

Particularly with injuries caused by the likes of toxic dusts where an industrial disease is the result. In this scenario in WA, we often find that that the regulator, the advisory agency, and the insurer, are one and the same; - The WA government.

Here we find individuals operating with Adolph Eichmann-type efficiency to protect their employer's interests from likely insurance claim.

Certainly the lead-poisoned workers were unable to make claim for a disease that they were unaware of contracting. Likewise the with asbestos, again text from Ben Hills' "Blue Murder":

Victims have been told they have a virus, pneumonia, bronchitis, anything, but what it inevitably turns out to be – asbestos disease.

# *Robert Vojakovic (of ADS) believes some government doctors do this deliberately, to try and save on compensation payments.*

A few years ago he set a trap: He selected a Wittenoom survivor who had been approved for compensation with 80 per cent asbestosis, and took him to the Perth Chest Clinic for an X-ray. The doctor put the negatives up on his screen and announced, "nothing there, come back in a year". When Mr. Vojakovic pointed to a dark patch and said, "Isn't that a shadow on his lung?" The doctor snapped off the light and repeated his diagnosis.

Sometimes the WA Health department simply exhibits a bloody-minded denial despite full knowledge of facts.

During a campaign by members of the public against the use of chemicals applied in mandatory spraying of new homes and extensions, the media reported that the WA Health Department admitted it was aware the pesticides it approved contained chemicals long considered to cause cancer and birth defects. But officials were still informing the public that residues in breast milk did not pose a threat.

Given this public display of corporate schizophrenia, one is obliged to seriously question the competence of those charged with protecting the public from toxic substances. It is



assumed however that competence or ability of individual government officers is satisfactory.

What requires investigation is the underlying peer pressure within the WA government's bureaucratic hierarchy that causes such aversion for public disclosure of the true nature of toxic substances, and the respective impacts on health and the environment.

The past and present practice of "sweeping it under the carpet" has and will continue to cost individuals and the community at large many, many more times than if issues regarding toxic substances are addressed correctly in the first instance.

## **Relevant Terms of Reference**

Summarising with this submission's relevance to the Inquiry's Terms of Reference:

This submission relates to experiences with asbestos and lead dusts, but there is no reason to believe that these same scenarios will not and have not been repeated with other toxic dusts and substances.

### a) Health Impacts

The impacts of asbestosis are well documented, with a diagnosis of mesothelioma the prognosis is grim. This is akin to slowly dying with wet concrete in one's chest. The impact of the WA government's mismanagement at Wittenoom is evident in the "Blue Murder" sub-title, - "<u>Two Thousand Doomed To Die</u>". We are by now past seeing the predicted deaths emerging of a second generation, - Children who lived and played in the town.

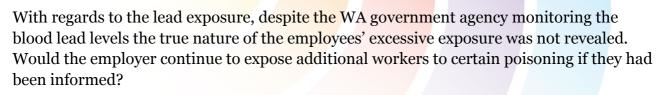
With lead in WA, the impact has been difficult to gauge, as the numbers excessively exposed have not been made public. Indeed, no investigation has taken place to determine the numbers not informed of contracting the disease. Whether it is two or three known cases, or a score, remains to be answered. There has been much research on the health impacts of lead, but no research has been undertaken to correlate with the extreme level of exposure recorded by the WA workers, with these blood lead levels being above the rate that kills children. The brain and CNS are prime target areas for lead. Of the two exposed workers from the same laboratory, both now suffer permanent neurological damage, together with a history of other textbook lead induced symptoms.

## b) Adequacy of Regulation

The scenarios demonstrated here did not occur due to lack of regulation. Regulations existed and were adequate. Regulations were deliberately ignored and not enforced.

## Information to Employers and Employees of Risks

The situation with Wittenoom asbestosis is both employers and employees were informed to some degree about the associated risks. However this was largely ignored. By continual lack of action by the regulator, this ignorance was encouraged.



## c) Availability of Accurate Diagnosis and Medical Services

As seen with the example of the chest X-ray given here, government officers sometimes deliberately avoid accurate diagnosis.

Also as demonstrated here with the lead worker; despite having several symptoms and extremely high blood lead readings, he was informed he had nothing to worry about. To compound his already serious condition, he was denied urgently required medical treatment. This negligence causing loss of any hope of resumption of normal health.

## d) Availability of Accurate Records, Nature of Illness, Disabilities

Experience with WA government records indicates that all too often records go "missing", are "misplaced", or "never existed".

Serious investigation of mismanagement is often thwarted by this means.

While the Asbestos Disease Society personnel were seeking documents from WA government departments they resorted to taking along a small spy camera to photograph documents in case the documents had somehow disappeared on subsequent visits.

As stated here, a lead worker has been unable to recover blood lead test results that he knows he completed.

Another lead worker was told no record of consultation with a department doctor existed. However in additional correspondence the department contradicted itself by referring to these records.

It is an interesting phenomenon that these disappearances should happen so frequently in an otherwise efficient public service.

### e) Access to Compensation, Limitations in Seeking Legal Redress

Sadly the situation in WA regarding legal redress and compensation has only relatively recently been addressed.

Key to this has been WA's Limitations Act, and although currently in the process of being reformed, it is feared the new version may still block out legal redress for some plaintiffs, perhaps even those suffering from latent conditions, such is typical with dust diseases.



Prior to the 1980's there was no legal redress for damages outside the 6 years limitations period. Unlike other states of Australia, there existed no scope for an extension of time by way of judiciary discretion.

It was only through the sheer embarrassingly high number of Wittenoom victims in WA making WA the world capital for mesothelioma, and the work of the Asbestos Diseases Society that a new law was legislated enabling asbestos disease to make claim for personal damages.

This has left WA with a totally illogical situation where an asbestos disease claimant can sue outside the limitations period, but no other claimant with any other disease or circumstances.

This is particularly relevant for dust and toxic substance diseases with a longer latency or manifestation period. There is also the situation as presented in the lead workers where they exhibit the disease, but are misinformed by the WA government that there is not a problem. Despite the WA government generating the misinformation causing the delay, it also hides behind the Limitations Act to deny justice and payment of compensation for damages that its own negligence has caused!

The proposal to change the current Limitations Act may assist some toxic substance victims, but the WA State Solicitor's Office argues against full discretionary extension powers to the judiciary that are exercised in nearly all other Australian states. So in this case, only plaintiffs that fit the fixed criteria will be granted an extension of time from a 3-year limitation period.

Unfortunately this will prevent the judiciary from being informed of ALL the reasons causing delay and acting in any discretionary manner. Therefore circumstances will arise where plaintiffs would have legitimate cause for a damages claim in other states in Australia, but not WA.

This failure of separation of powers of the judiciary and the legislature may give some indication of why this submission illustrates such a poor outlook of public confidence in the administration of toxic dust substances and the impact on health.

It may be argued that due to isolation the WA bureaucracy has evolved differently than other states, allowing an unwarranted power base. There appears to be an unwillingness to lose control of whatever departmental realm that any open investigation of mismanagement would expose to scrutiny. This of course is not limited to WA, but evidence presents the relatively high number of people dead or maimed by public mismanagement of toxic substances and a continual denial of problems. This situation is not confined to toxic dusts, but is also repeated elsewhere.

Far from being alone in this assessment, it is a longstanding view held by many.



While working on the asbestos cases in WA, Queens Counsel, David Ashley went home to Victoria where his young daughter asked him how the verdict would go?

His reply: "Darling, we are not going to win, you know, ...anywhere else, but not in Western Australia."

Why did our learned friend say such a thing?

...And what has changed since?

# LEAD Group Submission re: the Australian federal government's proposed lead Workplace Health and Safety (WHS) regulations, due 26<sup>th</sup> February 2016

By making a submission I hope that once the federal requirements change, State and Territory WHS Authorities will soon become much more pro-active in lead exposure prevention and that the medical system becomes much better able to manage lead-affected past and future painting contractors, pistol instructors and other workers exposed to lead.

This text is from a link from one of the links in the Invitation to make a submission email:

"In particular Safe Work Australia seeks views on options for:

- 1. setting levels of lead in workers' blood (blood lead levels) to identify:
  - trigger points to commence mandatory health monitoring of workers undertaking lead risk work
  - workers who need to be removed from lead risk work, and
  - when those workers may be returned to lead risk work.
- 2. setting a maximum concentration of lead in air for workplaces" [https://submissions.swa.gov.au/SWAforms/lead/pages/form]

In this submission I propose the trigger point (timing) of initial mandatory health monitoring (that is, blood lead testing and a standard medical appraisal including, as a minimum, blood pressure monitoring, kidney and liver function, presence of cataracts, hearing, reaction time, IQ, balance and memory testing) of workers undertaking lead risk



work as: prior to starting lead risk work or ASAP if health monitoring was not done prior to commencing lead risk work.

I also propose that repeat blood lead testing (and blood pressure testing if elevated in the first test and re-assessment of any other lead-related health issues found in the pre-lead-work medical appraisal) occurs within two weeks of starting lead risk work, and then monthly unless the blood lead level rises above 5 ug/dL.

Then I propose that all occupational blood lead results are notifiable to the state or territory Health Department as well as to the WHS Authority in each jurisdiction. This will require Safe Work Australia to recommend blood lead notification of all results to the Health and WHS Authorities in the various jurisdictions so they are motivated to change their notification regulations.

I propose too that if a worker's blood lead level is above 5 ug/dL, this would trigger the workplace being investigated by a WHS Inspector, the Inspector's orders being mandatorily followed and blood lead testing frequency would revert to fortnightly until the blood lead level returns below the NHMRC Public Health Reference Level of 5 ug/dL.

I propose a blood lead level of 10 ug/dL as the level at which workers need to be removed from lead risk work (to give more time for improvements in the lead-safety of the workplace and re-training in worker safety protocols) until the blood lead level falls below 2.5 ug/dL, when the worker may be returned to lead risk work.

Although I have no proposed appropriate maximum concentration of lead in air for workplaces (because that's a whole science on its own and it can only be derived after the "blood lead removal level" is set, I do however suggest that Australia follows US OHS lead guidance whereby they have determined a maximum dust wipe lead level in work areas and mess rooms. Whilst air lead monitoring may make sense (and already be happening) when the lead risk work is at a fixed location, for contractors or those working outside dust wipe lead is much more easily measured. Dust wipe samples can be obtained simply by the worker themselves or a Safety Officer being trained in how to collect dust wipe samples and posting them to a lab, or just by buying a LEAD Group Kit which includes the instructions for doing that. With a LEAD Group Kit, the purchase price includes receiving a report with recommendations on abatement of any lead hazards found at the workplace. and which can be set after the "blood lead removal level" is set. This proposed dust wipe lead level in the Australian WHS Lead Requirements, once set, would trigger further cleanup of the workplace and further engineering or other controls to reduce the creation or settling of lead dust and of "take-home" dust.

Finally, I propose that medical practitioners who wish to undergo training in management and prevention of occupational lead exposure, be supported in doing so, and listed, once trained, online, so that lead-exposed workers and their GPs can easily locate a specialist to assist the worker and prevent the further lead poisoning of their co-workers and families.

Yours Sincerely Elizabeth O'Brien



and LEAD Group test kit advice-via-Skype service, re: type of samples and where to collect them from, for a LEAD Group kit

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# Don't leave it to the last minute to enter Volcano Art Prize – entries close Monday 25<sup>th</sup> July 2016 – be ahead of the pack and ask your friends to vote for



the entries they Like via Facebook - even before the competition closes!

