

CFMEU SAFETY ALERT

WESTERN AUSTRALIA

Silica Dust

The current standard for workplace exposure to silica dust over an average of eight hours of 0.05 mg per cubic metre was set in 1983 and is out of date and not acceptable given the new materials such as artificial granite and engineered / manufactured / artificial stone commonly used for countertops.

Engineered, artificial or manufactured stone, a more affordable alternative to granite and typically contains around 90% silica while natural granite contains about half that amount. The industry needs to look at elimination and the use of alternative products as was the case with asbestos exposure.

For anyone having to work on granite and engineered stone safety measures should include tools fitted with dust extraction or wet cutting systems to reduce airborne silica dust and wearing of respiratory protective equipment, among other practices.

Some examples of tasks that can create dangerous levels of silica dust are:

Cutting, chasing, grinding, jackhammering, drilling and scabbling of bricks, concrete, masonry, sandstone or Engineered, artificial or manufactured stone, ceramic tile cutting, excavation and cleaning up of dust and debris created by the above activities

Other building and excavation workers in close proximity to these processes for long periods of time are also at risk.

Equipment used for these tasks should be fitted with extraction devices to eliminate the dust. Where dust extraction is not possible, wet methods should be used. For many jobs, some form of respiratory protection will also be needed, especially chasing work.

Health Surveillance

Where persons are potentially exposed to crystalline silica, an Occupational Hygienist should be consulted.

Where required health surveillance is required to be in accordance with applicable work health and safety laws and:

- WA OSH Regulation 5.23 Health surveillance, duties of employers, where exposure at a workplace to a hazardous substance as per schedule 5.3 Crystalline silica

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- Health surveillance includes demographic occupational questionnaire, chest x-rays, standardised respiratory function tests and records of personal exposure
- The medical examination should be conducted at least every five years, records kept for 30 years.

Australian Standards

- [AS/NZS 1715-2009 Selection, use and maintenance of respiratory protection](#)
- [AS/2985-2009 Workplace atmospheres method for sampling and gravimetric determination of respirable dust](#)

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