



MEU Submission to the Draft Underground Mines Rescue Medical Guideline

Guideline for assessing the medical suitability of coal mine workers to perform underground mines rescue tasks

The Mining and Energy Union Queensland District (MEU) is the largest union in the coal mining sector and is the principal union with coverage of workers performing all roles within the sector. The Union has represented coal mine workers since 1908 on all matters related to employment, with a particular focus on health and safety matters in the coal sector. The Union is also the only Union recognised by the *Coal Mining Safety & Health Act 1999* (CMSH Act) and Regulations, and also employs up to three (3) full time Industry Safety and Health Representatives, elected by the Union's membership, to perform the role in line with the provisions of the CSMH Act and Regulations.

Firstly, the MEU would like to express our disappointment in not being afforded the opportunity to sit at the table and positively contribute with other stakeholders during the development of the Guideline. The MEU has always supported the Queensland Mines Rescue Service (QMRS), and strongly believe the Service plays an essential role in protecting and enhancing the safety of Coal Mine Workers (CMW's). The MEU has always encouraged members to be actively involved in the Queensland Mines Rescue Service (QMRS). Indeed, a large proportion of CMW's certified by the QMRS for underground mines rescue tasks are MEU members. The fact that the MEU had no active voice in the development of the draft Guideline that greatly impacts the MEU's members should be immediately rectified for any future meetings.

Notwithstanding the above, we welcome the opportunity to respond to the draft Underground mines rescue medical guideline (the Guideline). In our submission, we only make comment on matters that we deem necessary. Where there is a proposed amendment to the Guideline from previous iterations, and the Union has not provided a submission on the particular matter, it can be taken that we are agreeable to the proposed change.

Firstly, the MEU supports the main change to the Guideline that is the physical fitness assessment contained in the previous editions, including VO2 max and step test, that has been removed. The Guideline now focusses on the medical suitability of workers.

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The MEU also supports the QMRS to provide additional evaluation of physical performance of candidates and to be responsible for the assessing and determining of their physical fitness competency. Further, we support the transition away from employer nominated and paid doctors, Appointed Medical Advisors (AMA's), from playing any part in the medical assessment of QMRS members. We support a similar model to NSW, where we understand that Coal Services, rather than employer doctors, oversee the medical assessment of underground rescue personnel. This is also inline with our support to remove employer AMA's from the CMW Health Assessment Scheme entirely.

Section 4.4

Employer responsibility should be expanded from covering reasonable travel costs, to also include payment for the time taken to complete the assessment. Completing the requirements of the medical assessments and process is required for the ongoing employment relationship, and should be recognised as work performed/ training, and as such should attract payment.

QMRS health assessments are onerous and time consuming. Particularly when you consider that health assessments for UMRWs shall be carried out at least once every two years for persons up to age 40 and every year for persons aged 40 and over. Well over and above the 5 year period for normal CMW's. This discourages CMW's from becoming an Underground mines rescue worker UMRW. There is constant difficulty for industry employers to maintain the legislated minimum number of mines rescue personnel at their site. This would assist with this problem.

4.4 Follow-up investigations and payment

The AMA may be required to refer the worker for further investigation or review with a treating doctor to inform the AMA's decision regarding the worker's medical suitability for participation in underground mines rescue.

Employers must cover the costs of all follow-up investigations, if required, for the AMA to complete the health assessment and make a decision regarding medical suitability. **This includes reasonable travel expenses.** Employers are not responsible for paying treatment costs under the CMWHS. Workers diagnosed with an occupational condition should be provided with a work capacity certificate and referred to the workers' compensation scheme where compensation for medical and rehabilitation costs can be considered. For non-occupational conditions, the worker should be referred to their regular health care provider for treatment under the public or private health care system.

Section 4.4.1

This section mentions that "It is not the responsibility of the treating doctor to provide "clearance". And after review of information from the treating doctor, the AMA has "The role and responsibility to determine medical suitability ... after review of the requested information."

The MEU is concerned that this may diminish the opinion of the treating doctor, particularly when there are conflicting opinions with the AMA. A CMW's treating doctor are mostly independently chosen by the CMW, and often a specialist in their chosen field of medicine. We believe that most AMA's are general practitioners. Their needs to be some protection for CMW's, where the medical advice provided by treating doctors is contradicted by the AMA. And a requirement for AMA's relevant medical suitability decision to support the treating doctors advice. Particularly when the treating doctor is a specialist. This paragraph requires further consultation.

4.4.1 Requesting further information from treating doctors

When further information is required, the AMA should provide the relevant treating doctor with the exact medical information that is required to inform the AMA's relevant medical suitability decision. Copies of the relevant section of this standard should also be provided to ensure clarity of expectation for the treating doctor.

Any additional formal testing that is required should be organised by the treating doctor at their discretion in order to be able to provide the AMA with requested medical information. It is not the responsibility of the treating doctor to provide "clearance". The role and responsibility to determine medical suitability remains with the AMA after review of the requested information.

9.0 Musculoskeletal conditions

The MEU believes that a musculoskeletal injury resulting in a period of > 2 months off physical work or sport in the last 5 years, to prohibit a person from becoming a UMRW, is too onerous. Musculoskeletal injuries often do not take 5 years to fully heal. The timeframe needs to be reduced, with advice of medical personnel, to a more reasonable 1-2 years.

Musculoskeletal conditions	Worker has not experienced any musculoskeletal conditions that: <ul style="list-style-type: none">• may cause sudden incapacity OR <ul style="list-style-type: none">• result in pain symptoms that limit relevant functional movement OR <ul style="list-style-type: none">• have resulted in a period of time > 2 months (related to single body region) off physical work or sport in the last 5 years.	Medically suitable to proceed to underground mines rescue training and testing (or tasks if QMRS certified).
	Pain symptoms have not been present recently and are considered unlikely to recur even with physically demanding tasks AND	Worker may be certified as Medically suitable (subject to review) to proceed to underground mines rescue training and testing (or tasks if QMRS certified).

The MEU thank you for the opportunity to respond to the draft Underground mines rescue medical guideline (the Guideline). We look forward to positive feedback to our submission.

Yours Sincerely,



Mitch Hughes
District President
Mining and Energy Union – QLD District