



VICTORIAN GOVERNMENT SOLICITOR'S OFFICE

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Ms Justine Stansen
Solicitor to the Board
Hazelwood Mine Fire Inquiry
Level 11
222 Exhibition Street
Melbourne VIC 3000

By email

Dear Ms Stansen

Board of Inquiry into Hazelwood Coal Mine Fire - Department of Health and Human Services (DHHS) - Scope of the Long Term Health Study

We confirm that the DHHS carefully considered the scope of the Hazelwood Long Term Health Study and determined that the focus would be on identifying potential public and community outcomes for Latrobe Valley residents impacted by the Hazelwood Mine Fire.

The tender specifications were developed across a number of weeks (the bulk of discussion and drafting occurred in May 2014) and were informed by community consultation sessions held in May 2014. The tender specifications set out the scope of the long term study.

In response to a separate request from the Board, we are providing documents and emails sent to Monash University about the scope of the study.

The question of including non-residents in the Hazelwood Health Study came up at a recent Long Term Health Study Steering Group Committee meeting (24 June 2015), which consists of Monash University (**Monash**) and DHHS.

On 24 June 2015, Monash indicated at the meeting that they had received a request from an emergency worker who was interested in the study. Monash clarified that the study would already be covering emergency responders if they lived in Morwell at the time of the fire, but not if they only worked in Morwell at that time. To do so would extend beyond the original scope of the study.

At the Committee meeting, the DHHS undertook to discuss this issue with Emergency Management Victoria (**EMV**). EMV advised that MFB and CFA employees are already in a voluntary monitoring program (not just for Hazelwood).

The CFA has an extensive program of support, health services and health monitoring for all their members as part of core business. Specifically to Hazelwood the CFA in partnership

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with MFB established a health monitoring process in relation to follow up from the Hazelwood Mine Fire - details are attached.

In response to the Monash's query, DHHS re-visited the question of the study scope and concluded that the best way to track occupational exposure and isolate the contribution of the Hazelwood Mine Fire would be through a very different study design than to the Hazelwood Health Study. The study is using a "control" community, in this case Sale.

In relation to emergency responders in particular, DHHS believe there would be significant methodological issues to include non-resident firefighters in the study. Firefighters across the state (and the interstate responders) would not be able to be included within the study design and methods selected by the research team. Firefighters differ to the general population as they are likely to have historical and multiple exposures to fire, smoke and other potential hazards. This complicated whole-of-career exposure within differing environments is very different to the single incident ambient exposure experienced by the community during the Hazelwood Mine Fire. As such it would be a very different study.

Recently, the Australasian Fire and Emergency Service Authorities Council (AFAC) - the national council and industry peak body for fire agencies engaged Monash to undertake a study specific to firefighters. Attached is a copy of the summary document by way of context. The full report is available on the world wide web.

The study was first commissioned in 2011 and a report provided to the AFAC in December 2014. Its aims were to examine mortality and cancer among firefighters and investigate different subgroups, based on type of employment, duration of firefighting service, era of first employment/service, serving before/including or only after 1985. It is likely that this study would satisfy the question of firefighter health in general - noting that it is not limited to a single event such as the Hazelwood Mine Fire.

This is an extract from the report:

"Overall Mortality

The overall risk of mortality was significantly decreased and almost all major causes of death were significantly reduced for male paid firefighters and for male and female volunteer firefighters. This is likely to be a result of a strong healthy worker effect and the likely lower smoking rates among firefighters compared with the Australian population. This is a common finding in such studies, whereby working populations tend to be healthier than the population from which they are drawn and this effect may be more pronounced in paid firefighters who need to meet strict fitness standards at the time of recruitment. There was no evidence of an increase in cardiovascular or respiratory mortality for firefighters compared to the Australian population or of cardiovascular mortality from internal analyses examining risk by duration of service or number of incidents attended. The cancer mortality risk for paid firefighters was comparatively higher than the risk for other major causes of death although still reduced compared to that of the Australian population".

Should you have any queries, please do not hesitate to contact the writer on 8684 0458.

Yours sincerely
Victorian Government Solicitor's Office

A handwritten signature in blue ink, appearing to read 'Andrew Suddick', written over the printed name.

Andrew Suddick
General Counsel (Litigation)
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