



MTAA RESPONSE TO:

# **Safe Work Australia**

## **Review of Health and Air Monitoring Requirements for Hazardous Chemicals**

September 2026

**[mtaa.com.au](https://mtaa.com.au)**



# Issue 1: Definition of "significant risk"

## Preferred option

*Option 1.1 - Retain "significant risk" but define the term*

MTAA position

MTAA supports retaining the term "significant risk" while introducing a clear and consistent regulatory definition.

MTAA submits that a "significant risk" should be understood as a significant risk to health arising from workplace exposure, having regard to both the likelihood of adverse health effects occurring and the severity of those effects.

The current terminology appropriately reflects the risk-based philosophy underpinning Australian workplace health and safety legislation. Replacing "significant risk" with "risk" would substantially broaden the circumstances in which health monitoring is required and, in practice, may create obligations even where exposure risks are effectively controlled and unlikely to result in adverse health outcomes.

MTAA considers that lowering the threshold in this manner would reduce regulatory certainty and may inadvertently capture circumstances where the anticipated worker health benefit is limited. This outcome would be inconsistent with the objective of providing greater clarity regarding when health monitoring obligations are triggered.

A regulatory definition should expressly require consideration of:

- > Frequency and duration of exposure.
- > Exposure concentrations.
- > Workplace exposure monitoring data.
- > Effectiveness of engineering controls.
- > Nature and toxicity of the chemical.
- > Likelihood of adverse health outcomes.
- > Potential cumulative exposure effects.

## Industry impact

*Option 1.1: Positive*

*Option 1.2: Negative*

Option 1.2 would substantially expand circumstances in which health monitoring may be required. MTAA has not seen evidence demonstrating that lowering the threshold from "significant risk" to "risk" would produce proportionate improvements in worker health outcomes. The likely outcome would be increased monitoring

costs, greater demand for specialist services and additional administrative obligations for businesses, particularly SMEs.

## Issue 2: Risk of exposure versus risk to health

### Preferred options

*Option 2.1 and Option 2.2*

MTAA position

MTAA supports aligning health monitoring requirements around a clear threshold based on risk to worker health arising from exposure.

Health monitoring exists to identify actual or potential health effects resulting from workplace exposure. A threshold based solely on exposure is inconsistent with the fundamental purpose of health monitoring and risks capturing situations where exposure is present but health risk remains negligible.

A health-based threshold is also likely to provide greater consistency in application across jurisdictions, industries and workplaces. PCBU, workers and medical practitioners are more likely to reach comparable conclusions where health monitoring obligations are linked to identified health risks rather than differing interpretations of exposure circumstances.

Improved guidance should include industry-specific worked examples involving spray painting operations, welding activities, refrigerant servicing and solvent use.

### Industry impact

*Option 2.1: Very Positive*

*Option 2.2: Positive*

## Issue 3: Valid techniques

### Preferred options

*Option 3.1 and Option 3.2*

MTAA position

MTAA supports defining "valid technique" within the Regulations and supplementing this with practical guidance.

The absence of a definition creates uncertainty regarding:

- > Acceptable testing methods.
- > Biological monitoring techniques.

- > Medical assessment methods.
- > Appropriate practitioner recommendations.

Where Safe Work Australia has published a health monitoring guide for a chemical, this should constitute strong evidence that a valid technique exists for the purposes of the Regulations.

Valid techniques should also be capable of providing information that is meaningful for decision-making and control review. Techniques that simply confirm exposure has occurred may be of limited practical value if they do not assist PCBU or medical practitioners to understand whether worker health is at risk or whether existing controls remain effective.

### **Industry impact**

*Option 3.1: Positive*

*Option 3.2: Positive*

## **Issue 4: Ongoing work**

### **Preferred options**

*Option 4.1 and Option 4.2*

MTAA position

MTAA supports clarification of the term "ongoing work", provided any expanded definition remains focused on workers with a genuine and foreseeable exposure risk and does not inadvertently capture workers whose exposure is incidental, trivial or negligible.

Automotive hazardous chemical exposure frequently occurs intermittently through maintenance, repair and specialised work activities rather than continuous production processes. Any definition should support consistent and practical application across diverse workplace environments. The automotive industry contains a wide range of business types, occupations and work arrangements, and overly broad definitions may create uncertainty regarding which workers are genuinely intended to be captured by health monitoring requirements.

For example, workers undertaking intermittent welding, spray painting, brake servicing or battery maintenance may be exposed periodically throughout a working week despite not performing those activities continuously. Guidance should clearly distinguish these circumstances from incidental or trivial exposure scenarios.

Guidance should address:

- > Task-based exposure.
- > Seasonal and intermittent work.
- > Shared work environments.

- > Contractor arrangements.
- > Indirect or bystander exposure.

### Industry impact

*Option 4.1: Positive, provided any expanded definition remains focused on workers with a genuine and foreseeable risk to health arising from workplace exposure.*

*Option 4.2: Positive*

## Issue 5: Biological exposure standards

### Preferred options

*Option 5.1 and Option 5.2*

MTAA position

MTAA supports both options.

In particular, Safe Work Australia should establish a centralised and readily accessible repository of biological exposure standards that mirrors the accessibility and transparency of Workplace Exposure Standards and Workplace Exposure Limits.

The current approach may make it difficult for PCBU, health practitioners and advisers to identify applicable biological exposure standards.

### Industry impact

*Option 5.1: Positive*

*Option 5.2: Very Positive*

## Issue 6: Schedule 14

### 6.1 Proposed criteria

MTAA position

MTAA generally supports the proposed criteria as a useful basis for future review and updating of Schedule 14 and for assessing whether hazardous chemicals should be subject to mandatory health monitoring.

However, MTAA recommends further consideration of:

- > Emerging technologies and chemical mixtures.
- > Process-generated contaminants.

- > Industry-specific exposure scenarios.
- > Practical implementation considerations for SMEs.

## **Industry impact**

### *Positive*

#### *Schedule 14 versus Alternative List*

### **Preferred option**

## **Option 6.2 – Retain and update schedule 14**

### MTAA position

MTAA strongly supports retaining Schedule 14 within the Regulations.

Schedule 14 provides legal certainty for duty holders, regulators, occupational hygienists and medical practitioners. It is a recognised reference point that assists businesses, particularly SMEs, in identifying regulatory obligations.

While MTAA supports regular updating of Schedule 14, replacing it with an external list risks creating confusion regarding legal status, compliance obligations and enforcement expectations.

Regulatory certainty should not be sacrificed in pursuit of administrative flexibility.

MTAA notes that Schedule 14 performs an important signalling function for duty holders, occupational hygienists and registered medical practitioners. For many SMEs, Schedule 14 provides an important reference point for identifying health monitoring obligations and understanding when prescribed health monitoring requirements may apply. Retaining Schedule 14 will continue to promote consistency, predictability and enforceability across jurisdictions.

### **Recommendation**

MTAA recommends a formal three-year review cycle for Schedule 14 supported by a technical advisory committee comprising:

- > Employer representatives.
- > Worker representatives.
- > Occupational hygienists.
- > Medical practitioners.
- > WHS regulators.

## **Industry impact**

*Option 6.2: Very Positive*

*Option 6.3: Negative*

## Issue 7: Health monitoring reports

### Preferred option

#### *Option 7.1*

##### MTAA position

MTAA supports transferring responsibility for regulator reporting from PCBUs to registered medical practitioners.

Registered medical practitioners are best positioned to determine whether reporting thresholds have been met and can provide consistent reporting outcomes. This approach may improve reporting quality and timeliness while reducing uncertainty for businesses.

However, MTAA does not support lowering the reporting threshold.

Exposure and harm are not synonymous. Many occupational exposures occur well below levels associated with adverse health outcomes. Lowering the threshold may generate large volumes of information with limited regulatory value while increasing administrative burden for practitioners and regulators.

MTAA recognises the value of exposure information for identifying emerging workplace risks. However, mandatory regulatory reporting should remain focused on circumstances involving injury, illness, adverse health effects or identified control deficiencies. General exposure information may be more effectively gathered through research, surveillance activities and targeted compliance initiatives rather than broad mandatory notification requirements.

MTAA supports reporting arrangements that generate meaningful information for regulators and assist in identifying emerging risks. However, reporting systems should prioritise information that is likely to inform intervention, prevention and control improvement activities rather than creating large volumes of data with limited practical regulatory value.

MTAA has not seen evidence demonstrating that lowering the reporting threshold would materially improve worker health outcomes. The likely consequence of Options 7.2 and 7.3 would be a substantial increase in report volumes, administrative obligations and regulator processing requirements without a corresponding increase in meaningful intervention opportunities.

MTAA also considers that reporting arrangements should remain focused on information that is relevant to worker health outcomes and effective regulatory intervention. Where practical, reporting thresholds should be linked to circumstances that indicate a meaningful risk to worker health rather than capturing exposure information that may have limited significance in the absence of an identified health risk. This would help ensure reporting systems remain targeted, proportionate and capable of generating information that supports prevention and control improvements.

### Industry impact

*Option 7.1: Positive*

*Option 7.2: Very Negative*

*Option 7.3: Negative*

## Issue 8: Information provided to medical practitioners

### Preferred options

*Option 8.1 and Option 8.2*

MTAA position

MTAA supports providing medical practitioners with relevant workplace exposure information where available and appropriate. This may include air monitoring results, risk assessments, historical monitoring data, control verification information and other exposure-related records.

MTAA considers that the focus should be on ensuring medical practitioners have sufficient information to make informed clinical assessments rather than prescribing a specific form of information in all circumstances.

Different workplaces may possess different forms of exposure information. Regulatory arrangements should therefore remain flexible enough to accommodate a range of legitimate approaches while ensuring practitioners receive information relevant to the worker's risk profile and exposure circumstances.

### Industry impact

*Option 8.1: Positive*

*Option 8.2: Positive*

## Issue 9: Linking health monitoring and risk management

### Preferred options

*Option 9.1 and Option 9.2*

MTAA position

MTAA supports clearer integration between health monitoring outcomes and workplace risk management processes.

Health monitoring outcomes should contribute to continuous improvement of workplace controls and risk management systems. However, any link between monitoring outcomes and further compliance actions should remain proportionate and focused on improving workplace health outcomes rather than creating additional administrative processes.

The Regulations should reinforce existing obligations to review and revise controls without creating additional layers of compliance or duplicate obligations.

MTAA supports Option 9.1 only to the extent that it clarifies existing duties rather than creating new standalone obligations.

### **Industry impact**

*Option 9.1: Positive, to the extent that it clarifies existing duties rather than creating new standalone obligations*

*Option 9.2: Positive*

## **Issue 10: Clarifying air monitoring requirements**

### **Preferred options**

*Option 10.1 and Option 10.2*

MTAA position

MTAA considers this the most significant issue addressed in the consultation.

Current wording creates uncertainty regarding:

- > The meaning of "no person at the workplace is exposed".
- > The meaning of "certain on reasonable grounds".
- > Use of historical monitoring data.
- > Representative sampling methodologies.
- > Frequency of monitoring.
- > Demonstrating compliance.

MTAA strongly supports clarification that compliance does not require continuous monitoring of every worker at all times.

The Regulations should explicitly recognise:

- > Representative occupational hygiene sampling.

- > Similar exposure groups.
- > Statistical exposure assessment methodologies.
- > Historical exposure monitoring data where workplace conditions remain substantially unchanged.
- > Competent-person exposure assessments.
- > Risk-based monitoring approaches.

In automotive workshop environments, worker activities, vehicle throughput, ventilation conditions and task duration can vary substantially from day to day. For this reason, representative sampling and professional exposure assessment methodologies are often more meaningful indicators of exposure risk than continuous monitoring approaches.

Clarification should explicitly recognise accepted occupational hygiene principles and contemporary exposure assessment practice. This would support greater consistency, reduce uncertainty and improve national implementation outcomes.

Air monitoring should remain a tool to validate the effectiveness of risk controls rather than becoming a standalone compliance objective.

Clarification should also support nationally consistent interpretation and enforcement. Businesses operating across jurisdictions should be able to understand when monitoring is required and how compliance may reasonably be demonstrated without relying on differing regulator expectations or interpretations.

### **Industry impact**

*Option 10.1: Very Positive*

*Option 10.2: Very Positive*

## **Issue 11: Relationship between air monitoring and hazardous chemical duties**

### **Preferred options**

*Option 11.2 and Option 11.3*

MTAA position

MTAA supports improved integration of air monitoring requirements through regulatory cross-referencing and enhanced guidance.

While the existing structure can be improved, MTAA is not persuaded that relocating regulations is necessary to achieve better compliance outcomes. More targeted amendments can achieve the same objective with less implementation complexity.

Improved guidance should clearly explain:

- > How air monitoring informs health monitoring.
- > When monitoring should trigger control reviews.
- > The interaction between air monitoring and broader WHS duties.
- > The limitations of workplace exposure limits as a sole risk management tool.

### **Industry impact**

*Option 11.1: Neutral*

*Option 11.2: Positive*

*Option 11.3: Very Positive*

*Option 11.4: Positive*

## **Additional Recommendations**

### **Recommendation 1: practical compliance guidance**

Safe Work Australia should develop practical worked examples demonstrating how health monitoring and air monitoring obligations apply in common workplace scenarios. Examples should illustrate when monitoring may be required, what information may be relied upon, and how PCBUs may reasonably demonstrate compliance.

### **Recommendation 2: industry implementation support**

Safe Work Australia should work with affected industries to develop implementation materials, decision-support tools and practical resources tailored to common workplace exposure scenarios.

### **Recommendation 3: access to technical expertise**

Safe Work Australia should investigate mechanisms to improve SME access to qualified occupational hygienists, particularly in regional and remote areas. Particular attention should be given to regional, remote and specialist industries where obtaining occupational hygiene services may be more difficult.

### **Recommendation 4: transitional arrangements**

Any regulatory amendments should be supported by:

- > A minimum 24-month implementation period, with an initial education-focused compliance approach to support consistent adoption, particularly for SMEs.
- > National education campaigns.
- > Practical compliance tools.
- > Templates and guidance materials.
- > SME-focused implementation support.

Transitional arrangements should provide sufficient time for businesses to obtain advice, update systems, train personnel and, where necessary, engage medical and occupational hygiene services.

#### **Recommendation 5: evidence-based regulatory assessment**

Future reforms should be supported by transparent assessment of expected health outcomes, implementation impacts, workforce capability requirements and compliance costs. Particular consideration should be given to practical implementation across SMEs and industries with intermittent and task-based exposure profiles.

## **Conclusion**

MTAA supports Safe Work Australia's objective of improving worker health outcomes and strengthening understanding of health and air monitoring requirements. The preferred approach is targeted regulatory clarification combined with practical guidance, education and nationally consistent implementation.

Priority should be given to defining key regulatory concepts, modernising Schedule 14, improving guidance materials and clarifying air monitoring obligations. MTAA considers that these measures are likely to improve compliance certainty and worker protection without imposing disproportionate costs on Australia's predominantly SME automotive sector.

MTAA reiterates concerns previously raised during hazardous chemicals reform consultations regarding cumulative regulatory burden facing automotive businesses, particularly SMEs. While MTAA supports measures that improve worker health outcomes, regulatory intervention should be proportionate, evidence-based and supported by a demonstrated likelihood of improving worker health outcomes.

MTAA acknowledges that workers' compensation and other available datasets may not capture every instance of work-related illness or disease. However, regulatory reform should be supported by robust evidence establishing both the scale of any identified problem and the likelihood that the proposed intervention will deliver measurable improvements in worker health outcomes. Where uncertainty exists, consideration should first be given to guidance, education, targeted compliance activity and improved access to technical expertise before introducing additional regulatory obligations.

As the peak body representing a large number of small automotive businesses, MTAA's members consistently support practical workplace health and safety measures that deliver demonstrable safety outcomes and can be implemented effectively within real-world operating environments.

While stakeholder concerns regarding low monitoring rates warrant ongoing examination, monitoring rates alone should not be regarded as evidence that existing regulatory settings are ineffective. Before introducing additional monitoring, reporting or record-keeping obligations, Safe Work Australia should clearly demonstrate that regulatory change will deliver measurable improvements in worker health outcomes that cannot reasonably be achieved through guidance, education, compliance support or more effective enforcement of existing duties.

For any questions regarding this submission, please get in touch via [info@mtaa.com.au](mailto:info@mtaa.com.au).

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