

Kia ora,

Please find in a table below with anonymous individual member feedback from the Royal Australasian College of Physicians (RACP) on the consultation on [Suggested additions to ACC list of occupational diseases](#). The views in this table are those of individuals and **do not necessarily reflect the views of the RACP**.

Respondent One	<p>I have been involved in these reviews on two previous occasions.</p> <p>The pragmatic conditions have likely already been included. Schedule 2 is used quite infrequently.</p> <p>Other conditions that could be considered have a strong political perspective such as seeking to provide cover for Firefighters for a range of cancers (with the job being the cause rather than a specific exposure).</p> <p>I would personally like to see that all cases of mesothelioma get cover, as the cause is almost exclusively due to asbestos. The main source of exposure now is the residual asbestos in homes, so the link is not considered work related. Unlike New Zealand, Australia has introduced policies and practices to significantly manage this risk. The problem with ACC is the work link. The job is the cause not the specific exposure. It would be interesting to see the volume of what ACC is accepting.</p> <p>Why don't we use an international standard list?</p>
Respondent Two	<p>Australia's revised list of deemed diseases, updated in 2021 for comparison is quite different to ours. I'm not sure how the regulatory frameworks here differ but they have a lot of infectious diseases on here that we don't have, including COVID and influenza Revised List of Deemed Diseases in Australia (safeworkaustralia.gov.au)</p> <p>Why are we not advocating for same as Australia?</p> <p>Noted the Stuff article outlining Minister's view and priorities ensuring women get covered https://www.stuff.co.nz/national/politics/130229903/acc-framework-changing-to-better-support-women</p> <p>But cannot think of what could be put on that is being declined.</p>
Respondent Three	<p>There is an important political aspect to this.</p> <p>Look at how they define what is on schedule 2. There is an absence of medical evidence. A lack of negative information is what they are looking at.</p>

Ngā mihi nui,

Privacy of natural persons



NB: I work part-time Monday, Tuesday and Wednesday 8.30am - 5.00pm.

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